

Email: cw@aws.org

AWS CERTIFIED WELDER APPLICATION

\$50, Certification fee must accompany this form.

(Prices are subject to change.)

Last Name													First Name															MI									
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Pers	Personal Information																																				
Che	Check one: Home Address Business Address (indicate company name below, if applicable)																																				
Add	Address (welder card will be sent to the address indicated on this form. Make sure to indicate Apt./Suite # for the address indicated.)																																				
City	City and State / Province / Country																Zip Code																				
Hom	Home Telephone Number Work Telephone Number															ı	Mobile Telephone Number																				
E-M	E-Mail Address																								U.S. Social Security Number (last 4 only)												
																									X	)	(	x		Х	Х						
	A courtesy renewal notification will be sent via email (3) months prior to the expiration of the welder certification. It is strongly recommended that a valid email address be indicated. (Note: If notification is not received, it remains the responsibility of the Certified Welder to renew on time.)																																				
	Upon obtaining my certification, I give AWS the right to reveal my certification status as it relates to its validity and the expiration date only.  No other information related to my certification shall be revealed.  Yes No. If Yes, please initial here																																				