



American Welding Society

Mail to: 550 NW LeJeune Rd Miami, FL 33126
(800) 443-9353 or (305) 443-9353, ext. 273

Certified Welding Educator Exam Application

Faxed or emailed applications are **NOT** accepted

Last Name															First Name															MI	

Mailing Address																									Apt #	

Address (cont'd)																								

City and State / Province / Country															Zip Code				

Home Telephone Number					Work Telephone Number					Mobile Telephone Number				

Date Of Birth MM/DD/YY				U.S. Social Security Number			
				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			

E-Mail Address (Confirmation notification will be sent to this address)																								

1. Please indicate the exam location of your choice:

PLEASE ALLOW 3-4 WEEKS PROCESS TIME. CONFIRMATION LETTERS WILL BE EMAILED UNLESS EMAIL ADDRESS IS NOT INDICATED IN SECTION 6.

AWS Seminar/Exam Schedule - Please visit our website <http://www.aws.org/certification/seminarexam/>

1 st Site Code: _____	Exam Date: _____	City/State: _____	*Submission Deadline: _____
2 nd Site Code: _____	Exam Date: _____	City/State: _____	*Submission Deadline: _____
3 rd Site Code: _____	Exam Date: _____	City/State: _____	*Submission Deadline: _____

NOTE: AWS strongly recommends the applicant selects a second and third site location alternative. If the first choice is not available, the next available location will be selected. Please **do not** make any hotel or flight arrangements until you have received your exam confirmation letter from the Certification Department.

2. Please complete the following:

Your AWS Member # (if applicable) _____
<input type="checkbox"/> Check here if taking a non AWS seminar prior to the exam.
Name of Agency: _____
City, State: _____
Are you employed by an AWS SENSE program participating organization (must provide copy of certificate)? <input type="checkbox"/> No <input type="checkbox"/> Yes
If yes, the Facility ID #: _____
S.E.N.S.E. Examination

3. Please check all that apply:

<input type="checkbox"/> Welding Inspection Technology Workshop & Visual Inspection Workshop
<input type="checkbox"/> Welding Inspection Technology Workshop <i>Only</i>
<input type="checkbox"/> Visual Inspection Workshop <i>Only</i> :
<input type="checkbox"/> EXAMINATION

Seminar/Exam Fees - Please visit our website <http://www.aws.org/certification/pricelist/>

4. Method of Payment- all checks and money orders should be made payable to AWS.

PAYMENT MUST ACCOMPANY YOUR APPLICATION

<input type="checkbox"/> Check or money order # _____
<input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX <input type="checkbox"/> Diners <input type="checkbox"/> Discover
CC#: _____ / _____ / _____ / _____ Exp: _____ / _____

SIGNATURE _____

AWS USE ONLY	
Acct #:	_____
Date:	_____
Amt \$:	_____

5. Associations

Type of Business (check only ONE)	Job Classification (check only ONE)	Technical Interests (check ALL that apply)
A <input type="checkbox"/> Contract construction	01 <input type="checkbox"/> President, owner, partner, officer	<input type="checkbox"/> Ferrous metals
B <input type="checkbox"/> Chemicals & allied products	02 <input type="checkbox"/> Manager, director, superintendent (or assistant)	<input type="checkbox"/> Aluminum
C <input type="checkbox"/> Petroleum & coal industries	03 <input type="checkbox"/> Sales	<input type="checkbox"/> Non-ferrous except aluminum
D <input type="checkbox"/> Primary metal industries	04 <input type="checkbox"/> Purchasing	<input type="checkbox"/> Advanced materials/intermetallics
E <input type="checkbox"/> Fabricated metal products	05 <input type="checkbox"/> Engineer — welding	<input type="checkbox"/> Ceramics
F <input type="checkbox"/> Machinery except elect. (incl. gas welding)	06 <input type="checkbox"/> Engineer — other	<input type="checkbox"/> High energy Processes
G <input type="checkbox"/> Electrical equip., supplies, electrodes	07 <input type="checkbox"/> Inspector, tester	<input type="checkbox"/> Arc Welding
H <input type="checkbox"/> Transportation equip. - air, aerospace	08 <input type="checkbox"/> Supervisor, foreman	<input type="checkbox"/> Brazing & Soldering
I <input type="checkbox"/> Transportation equip. - automotive	09 <input type="checkbox"/> Welder, welding or cutting operator	<input type="checkbox"/> Resistance Welding
J <input type="checkbox"/> Transportation equip. - boats, ships	10 <input type="checkbox"/> Architect, designer	<input type="checkbox"/> Thermal Spray
K <input type="checkbox"/> Transportation equip. - railroad	11 <input type="checkbox"/> Consultant	<input type="checkbox"/> Cutting
L <input type="checkbox"/> Utilities	12 <input type="checkbox"/> Metallurgist	<input type="checkbox"/> NDT
M <input type="checkbox"/> Welding distributors & retail trade	13 <input type="checkbox"/> Research & development	<input type="checkbox"/> Safety & Health
N <input type="checkbox"/> Misc. repair services (incl. welding shops)	14 <input type="checkbox"/> Technician	<input type="checkbox"/> Pipe & Tubing
O <input type="checkbox"/> Educational Services (univ., libraries, schools)	15 <input type="checkbox"/> Educator	<input type="checkbox"/> Pressure Vessels & Tanks
P <input type="checkbox"/> Engineering & architectural services (incl. assns.)	16 <input type="checkbox"/> Student	<input type="checkbox"/> Structures
Q <input type="checkbox"/> Misc. business services (incl. commercial labs)	17 <input type="checkbox"/> Librarian	<input type="checkbox"/> Roll Forming
R <input type="checkbox"/> Government (federal, state, local)	18 <input type="checkbox"/> Customer service	<input type="checkbox"/> Sheet metal
S <input type="checkbox"/> Other	19 <input type="checkbox"/> Other	<input type="checkbox"/> Stamping & punching
	20 <input type="checkbox"/> Engineer - design	<input type="checkbox"/> Bending & shearing
	21 <input type="checkbox"/> Engineer - manufacturing	<input type="checkbox"/> Aerospace
	22 <input type="checkbox"/> Quality Control	<input type="checkbox"/> Automotive
		<input type="checkbox"/> Machinery
		<input type="checkbox"/> Marine
		<input type="checkbox"/> Other
		<input type="checkbox"/> Automation
		<input type="checkbox"/> Robotics
		<input type="checkbox"/> Computerization of Welding

6. Education, Training, and Experience Records

A. EDUCATION RECORDS

Applicants shall have at least a valid High School Diploma or General Equivalency Diploma (GED)

Please check the appropriate box below :

- High school graduate or achieved GED certificate
- Technical School/Trade/Vocational Courses
- Associates or higher degree

B. TRAINING

Additional education AND EXPERIENCE: A maximum of two (2) years of post high school education may be substituted for an equal number of years of the required 5 (five) years experience according to section 6.2 of AWS B5.5

<input type="checkbox"/> VoTech credits MUST attach transcripts of welding related courses or diploma	Circle no. of years attended 0 1 2 3 4	Maximum one (1) year work substitution only for successfully completed courses in a curriculum that can be applied to an associate or higher degree in welding technology or welding engineering
<input type="checkbox"/> College credits MUST attach transcripts of engineering-level courses or diploma	Circle no. of years attended 0 1 2 3 4	Maximum two (2) years work substitution only if the degree is in welding technology or welding engineering

NAME _____ ACCOUNT NO. _____

C. WORK EXPERIENCE

Applicants shall have no less than five years experience in an occupational function that has a direct relationship to weldments fabricated to a code or standard and shall be directly involved in one or more of the following: production, construction, inspection, and repair. Please refer to the AWS QC5-91, *AWS Standard for Certification of Welding Educators*.

**** NOTE: PLEASE DUPLICATE THIS SECTION FOR EACH ADDITIONAL EMPLOYER IN ORDER TO MEET THE QUALIFYING WORK EXPERIENCE REQUIREMENTS FOR CWE ELIGIBILITY.**

(Initials) I understand that all work experience documented on this application may be verified with both past and present employers.

Company Name		Type of Business	Company Phone Number	
Company Street Address		City, State, Zip Code		
Supervisor's Name		Title of Immediate Supervisor		
Supervisor's Email Address		Department		
Applicant's Job Title		Employed From: (Mo.) (Yr.)	To: (Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*				

Company Name		Type of Business	Company Phone Number	
Company Street Address		City, State, Zip Code		
Supervisor's Name		Title of Immediate Supervisor		
Supervisor's Email Address		Department		
Applicant's Job Title		Employed From: (Mo.) (Yr.)	To: (Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*				

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Company Street Address		City, State, Zip Code		
Supervisor's Name		Title of Immediate Supervisor		
Supervisor's Email Address		Department		
Applicant's Job Title		Employed From: (Mo.) (Yr.)	To: (Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*				

7. Employment Verification

NAME _____ ACCOUNT NO. _____

** NOTE: THIS SECTION **MUST** TO BE COMPLETED BY A SUPERVISOR OR PERSONNEL MANAGER FROM THE MOST RECENT EMPLOYER. IF SELF-EMPLOYED OR CONTRACT APPLICANT YOU MUST SUBSTITUTE THIS SECTION WITH A LETTER OF REFERENCE ON COMPANY LETTERHEAD FROM TWO (2) SEPARATE CLIENTS ATTESTING TO THE NATURE OF WORK ASSIGNMENTS DURING THE PERIOD OF PERFORMANCE.

IF THE EMPLOYER IS NO LONGER IN BUSINESS, PLEASE INCLUDE A COPY OF THE W2 FORM.

Employee's Last Name: _____ First Name: _____ MI: _____

Employer Name: _____ Phone: () _____

Employer Address: _____

City: _____ ST/Prov.: _____ Zip: _____ Country: _____

Supervisor / Personnel Manager: _____ Dept/Div: _____

Supervisor / Personnel Manager's Email: _____

I verify that _____ is or was an employee at this company and conducts the duties during the employment periods stated in this application.

Name: _____ Title: _____

Signature: _____ Date: _____

8. Welder Certification or Test Record

Applicants for the AWS Certified Welding Educator certification must have and submit a copy of a valid welder ID/certification card or shall passed a valid welder test for the welding process to be taught.

9. Certified Welder Educator Instructor Credentials Form

All CWE applicants must complete and submit the CWE Instructor Credentials form with this application. Please download and print the form from our website http://www.aws.org/certification/docs/CWE_InsCredForm.pdf.

10. Testimonial: (this section **MUST** be completed or application will be rejected)

(Applicants must read and sign the following statement in front of a notary)

I hereby certify I have read the requirements contained in the QC-5 Standard for AWS Certification of Welding Educators. Further, I agree to comply with the existing requirements and any subsequent requirements that may be instituted by AWS. I have read and agree to the terms and conditions set forth in the AWS Policies and Fees form. I certify that the information I have included on this application is true. I understand that any false statements will nullify this application. I give AWS permission to verify this information. I agree to comply with the provisions set forth in the Standard concerning the administration of my examination and certification. Upon obtaining my certification, I give AWS the right to reveal my certification status as it relates to my validity and expiration date only. I further understand that any required information that is incomplete or missing will cancel this registration.

Furthermore, I certify that I have not obtained any exam materials, have no prior knowledge of the AWS exam questions or answers, and have not and will not accept any solicitation for the AWS exam questions or answers from anyone at any time before or after the exam. I understand that a violation of this oath may be grounds for invalidation of my certification.

Applicant's Signature _____ Date: _____

THE FOLLOWING IS TO BE COMPLETED BY A NOTARY PUBLIC

Sworn to and subscribed before me this _____ day of _____ of year _____.

My commission expires _____ Notary Public Signature _____ (seal and/or stamp is REQUIRED)

AWS Policies and Fees- Please visit our website <http://www.aws.org/certification/policiesfees/>