

4. ASSOCIATIONS		
TYPE OF BUSINESS CHECK ONE BOX	JOB CLASSIFICATION CHECK ONE BOX	YOUR TECHNICAL INTERESTS FILL IN ORDER OF PRIORITY (1,2,3,ETC.)
A. <input type="checkbox"/> Contract Construction	01. <input type="checkbox"/> President, owner, partner, officer	1. ____ Robotics
B. <input type="checkbox"/> Chemicals, Allied Products	02. <input type="checkbox"/> Manager, director, superintendent	2. ____ Computerization of Welding
C. <input type="checkbox"/> Petroleum & Coal Industries	03. <input type="checkbox"/> Sales	A. ____ Ferrous metals
D. <input type="checkbox"/> Primary Metal Industries	04. <input type="checkbox"/> Purchasing	B. ____ Aluminum
E. <input type="checkbox"/> Fabricated Metal Products	05. <input type="checkbox"/> Engineer - welding	C. ____ Nonferrous metals except aluminum
F. <input type="checkbox"/> Machinery except electrical	06. <input type="checkbox"/> Engineer - other	D. ____ Advanced materials, intermetallics
G. <input type="checkbox"/> Electrical equipment, supplies, electrodes	07. <input type="checkbox"/> Inspector, tester	E. ____ Ceramics
H. <input type="checkbox"/> Transport equipment, air, aerospace	08. <input type="checkbox"/> Supervisor, foreman	F. ____ High energy beam processes
I. <input type="checkbox"/> Transport equipment, automotive	09. <input type="checkbox"/> Welder, welding or cutting operator	G. ____ Arc Welding
J. <input type="checkbox"/> Transport equipment, boats, ships	10. <input type="checkbox"/> Architect, designer	H. ____ Brazing and soldering
K. <input type="checkbox"/> Transport equipment, railroad	11. <input type="checkbox"/> Consultant	I. ____ Resistance welding
L. <input type="checkbox"/> Utilities	12. <input type="checkbox"/> Metallurgist	J. ____ Thermal spraying
M. <input type="checkbox"/> Welding distributorship & retail trade	13. <input type="checkbox"/> Research and development	K. ____ Cutting
N. <input type="checkbox"/> Misc. repair services inc. welding	14. <input type="checkbox"/> Technician	L. ____ NDE
O. <input type="checkbox"/> Education services inc. schools, libraries	15. <input type="checkbox"/> Educator	M. ____ Safety and health
P. <input type="checkbox"/> Engineering & architectural services	16. <input type="checkbox"/> Student	N. ____ Bending and shearing
Q. <input type="checkbox"/> Misc. business services inc. laboratories	17. <input type="checkbox"/> Librarian	O. ____ Roll forming
R. <input type="checkbox"/> Governmental (federal, state, local)	18. <input type="checkbox"/> Customer service	P. ____ Stamping and punching
S. <input type="checkbox"/> Other	19. <input type="checkbox"/> Other	Q. ____ Aerospace
T. <input type="checkbox"/> Structural Steel Fab	20. <input type="checkbox"/> Engineer- Design	R. ____ Automotive
U. <input type="checkbox"/> Misc Steel Fab	21. <input type="checkbox"/> Engineer- Manufacturing	S. ____ Machinery
V. <input type="checkbox"/> Misc Mtrl Fab	22. <input type="checkbox"/> Quality Control	T. ____ Marine
W. <input type="checkbox"/> Elct & Eltr Mac		U. ____ Piping and tubing
X. <input type="checkbox"/> Meas & Anly Inst		V. ____ Pressure vessels and tanks
		W. ____ Sheet Metal
		X. ____ Structures
		Y. ____ Other
		Z. ____ Automation

LAST NAME _____ FIRST NAME _____

5. EDUCATION AND EXPERIENCE REQUIREMENTS

<input type="checkbox"/> High school graduate or achieved GED certificate.
<input type="checkbox"/> Have no less than two year of experience in an occupational function in direct relation to the sales of welding equipment, cutting equipment, and supplies and other related services. <i>Verifiable documented evidence is required with this application.</i>
<input type="checkbox"/> Have a training certificate of completion for welding processes, cutting processes, and filler metal if he or she has less than five years of experience in an occupational function in direct relation to the sales of welding equipment, cutting equipment, and supplies and other related services. <i>Verifiable documented evidence is required with this application.</i>

Note The prerequisite above can also be fulfilled by attending the AWS CWSR 3-day seminar and receiving a certificate of completion.

8. QUALIFYING WORK EXPERIENCE - RESUMES NOT ACCEPTED

NOTE: IF NEEDED, PLEASE DUPLICATE THIS SECTION FOR ADDITIONAL EMPLOYERS TO VERIFY THE QUALIFYING WORK EXPERIENCE REQUIREMENTS FOR CWSR ELIGIBILITY.

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

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:	To:	
	(Mo.) (Yr.)	(Mo.)	(Yr.)
Job Responsibilities- <i>Detailed Description Required*</i>			

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

LAST NAME _____ FIRST NAME _____

9. EMPLOYMENT VERIFICATION: (this section must be completed by a supervisor or personnel manager from the most recent employer)

Company Name: _____ Company Phone: _____

Company Address: _____

City, State: _____ Zip Code: _____ Country: _____

I _____, verify that _____ maintained employment at _____

_____ from _____ to _____

Signature: _____ Date: _____

10. TESTIMONIAL BY APPLICANT

I hereby certify I have read the requirements contained in AWS QC14, Specification for the Certification of Welding Sales Representatives. 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 the information I have included in this application is true. I understand any false statements will nullify this application. I further understand that if any information is incomplete or missing, my application will not be processed until all documentation is complete. Therefore, the examination will not be scheduled until all obligations are fulfilled. I agree to comply with the provisions set forth in AWS QC14 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.

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)

Examination Structure and Body of Knowledge

AWS Certified Welding Sales Representative

The Candidate shall pass a written examination to demonstrate knowledge of the capabilities listed in 5.2 of this AWS B5.14:2009. Recommended examination subjects and recommended subject weights are given in Table 1 below.

Table 1

Recommended Examination Subjects and Weights	
Examination Subject Percentage	(%)*
Gas metal arc welding (GMAW)	9%
Gas tungsten arc welding (GTAW)	9%
Flux-cored arc welding (FCAW)	9%
Shielded metal arc welding (SMAW)	9%
Submerged arc welding (SAW)	4%
Safety in welding, cutting, and related processes	4%
Safety in gas cylinder storage and handling	2%
Brazing and soldering	4%
AWS filler metal classification guidelines	9%
Shielding gas applications	9%
Welding terms and definitions	9%
Welding fume extracting and ventilation	4%
Basic electrical requirements of welding power supplies	4%
Cutting processes	4%
Welding procedures and procedure qualification records	2%
*Percentages indicate the <i>minimum</i> suggested percentage in each examination subject therefore the total given is less than 100%.	

RECOMMENDED SELF-STUDY FOR EXAMINATION

The examination questions shall be referenced from the following publications:

- ANSI Z49.1, *Safety in Welding, Cutting, and Allied Processes*
- AWS A3.0, *Standard Welding Terms and Definitions*
- AWS A5.01M/A5.01, *Procurement Guidelines for Consumables—Welding and Allied Processes—Flux and Gas Shielded Electrical Welding Processes*
- AWS A5.32/A5.32M, *Specification for Welding Shielding Gases*
- AWS F3.2M/F3.2, *Ventilation Guide for Weld Fume*
- *Brazing Handbook*, 5th Edition, American Welding Society
- *Modern Welding Technology*, 5th Edition, Howard Cary, Prentice Hall
- *Soldering Handbook*, 3rd Edition, American Welding Society
- *Welding Handbook Volume 1: Welding Science and Technology*, 9th Edition American Welding Society
- *Welding Handbook Volume 2: Welding Processes*, 9th Edition, American Welding Society



AWS Policies and Fees

IMPORTANT NOTICE!!

"No Show" Penalty

IF A CANDIDATE FAILS TO CANCEL, RESCHEDULE OR SHOW UP TO THE SEMINAR/EXAM OR EXAM ALL FEES ARE FORFEIT.

Seminar and/or Exam Cancellation

THE CERTIFICATION DEPARTMENT MUST RECEIVE A [CHANGE OF SITE/CANCELLATION](#) FORM VIA EMAIL OR FAX NO LATER THAN TWO WEEKS PRIOR TO THE WEEK OF THE CONFIRMED SEMINAR/EXAM OR EXAM START DATE. A REFUND IS ISSUED MINUS THE CANCELLATION FEE. THE FEES ARE AS FOLLOWS:

SEMINAR ONLY	- \$550
EXAM ONLY	- \$200
SEMINAR AND EXAM	- \$750

Seminar/Exam or Exam Rescheduling

THE CERTIFICATION DEPARTMENT MUST RECEIVE A [CHANGE OF SITE/CANCELLATION](#) FORM VIA EMAIL OR FAX. IF NOT RECEIVED, THE "NO SHOW" PENALTY WILL APPLY. ONLY THE 1ST TWO (2) RESCHEDULING REQUESTS RECEIVED ARE PROCESSED WITHOUT CHARGE. ANY ADDITIONAL RESCHEDULING REQUESTS RECEIVED ARE CHARGED A RESCHEDULING FEE AND MUST BE PAID IN FULL PRIOR TO YOUR RESCHEDULING REQUEST BEING PROCESSED. THE RESCHEDULING FEES ARE AS FOLLOWS:

SEMINAR ONLY	- \$350
EXAM ONLY	- \$200
SEMINAR AND EXAM	- \$550

Reschedule/Cancellation Requests

RESCHEDULE/CANCELLATION REQUESTS **ARE NOT** ACCEPTED THE WEEK OF THE CONFIRMED EVENT. FAILING TO SHOW UP ("NO SHOW") FOR YOUR SCHEDULED SEMINAR/EXAM OR EXAM RESULTS IN FORFEIT OF ALL FEES.

Fast Track

THE APPLICATION SUBMISSION DEADLINE IS SIX (6) WEEKS PRIOR TO THE WEEK OF THE SCHEDULED SEMINAR/EXAM OR EXAM DATE. PLEASE REFER TO THE SEMINAR/EXAM SCHEDULE TO CONFIRM THE SUBMISSION DEADLINE DATE. AN APPLICATION RECEIVED AFTER THE SUBMISSION DEADLINE AND/OR FEES PAID IN FULL AFTER THE SUBMISSION DEADLINE DATE, BUT NO LATER THAN THREE WEEKS PRIOR TO THE WEEK OF THE EVENT IS PROCESSED FOR THE REQUESTED TEST SITE IF SPACE IS AVAILABLE. \$250 FAST TRACK FEE IS CHARGED FOR THIS SERVICE. FULL PAYMENT FOR THE APPLICATION AND FAST TRACK FEE IS REQUIRED IN ORDER FOR TO BE PROCESSED AND COMPLETE REGISTRATION. PLEASE DO NOT MAKE TRAVEL OR HOTEL ARRANGEMENTS PRIOR TO RECEIVING A CONFIRMATION LETTER FOR THE SEMINAR/EXAM OR EXAM.

Processing Fee

THE PROCESSING FEE IS INCLUDED IN ALL CERTIFICATION PRICE LIST FEES. IF A CANDIDATE DOES NOT MEET THE QUALIFICATION REQUIREMENTS, A REFUND IS ISSUED MINUS \$75 PROCESSING FEE.

ALL FEES ARE NONTRANSFERABLE. FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE. AWS RESERVES THE RIGHT TO CANCEL ANY SEMINAR AND/OR EXAM IF THERE ARE AN INSUFFICIENT NUMBER OF PARTICIPANTS. IN THE EVENT OF CANCELLATION BY AWS, ALL SEMINAR/EXAM FEES WILL BE REFUNDED IN FULL, OR THE PARTICIPANT MAY TRANSFER TO THE NEXT AVAILABLE SEMINAR AND/EXAM OR EXAM. IN EITHER CASE, AWS SHALL HAVE NO FURTHER LIABILITY.