



## **CWS Renewal Program Information**

The renewal process is part of your continued certification according to the QC13:2006 *Standard for AWS Certification of Welding Supervisors* (Refer to Section 10). Please complete the application accordingly and submit to AWS prior to your certification expiration date. For further information concerning the CWS Renewal, please refer to the QC13:2006.

### **CWS RENEWAL:**

Please be aware that it is your responsibility to renew your certification before it expires. For purposes of renewal and recertification, an expiration grace period of 30 days exists from the expiration date.

To qualify for a renewal, all CWS applicants must attest to continued activity, in the practice of welding supervision during the previous period of the certification. Please indicate on the renewal application, under Your Duties and Responsibilities, which areas that you had activity in at any time during the previous three years. No minimum time is required.

### **INTERNATIONAL AND DOMESTIC RENEWAL APPLICANTS:**

Please be aware that it is **MANDATORY** that all applications are notarized. Applications without proper notarizations will not be processed.

Please allow adequate time for your application to be processed. Applicants who have been accepted for the exam will receive a confirmation package via email. If an email address is not provided, your package will be mailed.

**Applications CANNOT be faxed or emailed so please be prompt in submitting your application.**

We recommend you use priority mail with tracking options when mailing your application. If you choose to mail your application via overnight delivery, please mail directly to: **American Welding Society, 550 NW LeJeune Road, Miami, Florida 33126**. Please retain a copy of your completed application for your records.

### **Please be sure to do the following before submitting your application to AWS:**

- Complete and sign the application (the address indicated on the application is where your documents will be mailed).
- Application must be notarized – Both domestically and internationally. **NO EXCEPTIONS.**
- Payment is included with the application

If there are any questions or concerns regarding the renewal process, please feel free to contact the AWS Certification Department at: 1-800-443-9353, ext. #273. Our Certification Coordinators are available to assist you Monday through Friday from 8:00 am to 5:00 pm eastern standard time.



LAST NAME:

FIRST NAME:

**ASSOCIATIONS**

<b>TYPE OF BUSINESS</b> CHECK ONE BOX	<b>JOB CLASSIFICATION</b> CHECK ONE BOX	<b>YOUR TECHNICAL INTERESTS</b> 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:**

**QUALIFYING WORK EXPERIENCE – NO RESUMES ACCEPTED**

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

**\*\*NOTE: PLEASE DUPLICATE THIS PAGE FOR EACH ADDITIONAL EMPLOYER IN ORDER TO MEET THE WORK EXPERIENCE REQUIREMENTS FOR CWS RENEWAL.**

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 PRODUCTS**

**Is your employer's products fabricated in accordance with:**

- a company                       a US standard                       an international standard                       no standard

**YOUR DUTIES AND RESPONSIBILITIES:**

**Please check which activities you performed within the past three years:**

- Prepare welding plans and/or drawings
- Plan or control materials, procedures, and operations for weldment fabrication
- Perform, supervise or monitor joint preparation for weldment fabrication
- Perform, supervise, monitor, witness, and/or approve inspection of joint preparation
- Supervise or monitor weldment fabrication and/or repairs
- Develop welding inspection procedures
- Perform, supervise, monitor, witness, and/or approve inspection of fabricated weldments
- Train welders to fabricate weldments
- Train inspectors to inspect weldments

LAST NAME:

FIRST NAME:

**EMPLOYMENT VERIFICATION**

PLEASE HAVE THIS SECTION COMPLETED BY A SUPERVISOR OR PERSONNEL MANAGER FROM YOUR MOST RECENT EMPLOYER. IF YOU ARE SELF-EMPLOYED, YOU MUST INSTEAD SUBMIT TWO NOTARIZED LETTERS OF REFERENCE FROM SEPARATE CLIENTS.

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: \_\_\_\_\_

**PLEASE PRINT EXCEPT FOR SIGNATURE**

I verify that: \_\_\_\_\_, whose social security number is: \_\_\_\_\_ is / was  
(circle one)

employed by this company and conducted the duties submitted in this application during the employment periods submitted in this application.

My name is: \_\_\_\_\_ My job title is: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

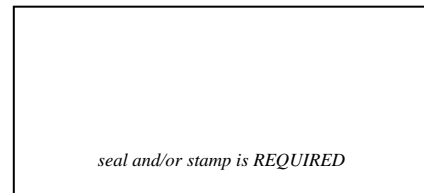
**TESTIMONIAL:** *(Applicants must read and sign the following statement in front of a notary)*

I hereby certify that I have read the requirements contained in the document *AWS B5.9:2006 Specification for the Qualification of Welding Supervisors* and *QC13:2006 Specification for the Certification of Welding Supervisors*. 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 CWS 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 information that is incomplete or missing will consider this application on conditional basis in which it will render the release of my renewal.

Applicant's Signature \_\_\_\_\_ Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_. My commission expires \_\_\_\_\_

Notary Public Signature \_\_\_\_\_





## 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 1<sup>ST</sup> 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.

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**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.**