

# American Welding Society

Founded in 1919 to Advance the Science, Technology and Application of Welding



## NOTARY PAGE

**THIS PAGE IS TO SATISFY THE MISSING NOTARIZATION FOR MY CERTIFICATION APPLICATION THAT WAS PREVIOUSLY SUBMITTED TO THE AWS CERTIFICATION DEPARTMENT.**

Date: \_\_\_\_\_ Account No. (If known): \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Certification No. (If applicable): \_\_\_\_\_

### TYPE OF APPLICATION:

- Certified Welding Inspector**                       **Senior Certified Welding Inspector**                       **9-Yr Re-Certification**  
QC1:2007 Standard for the AWS Certification of Welding Inspectors & B5.1:2003 Specification for the Qualification of Welding Inspectors
- Certified Welding Educator**  
QC5:1991 AWS Standard for the Certification of Welding Educators & B5.5:2000 Specification for the Qualification of Welding Educators
- Certified Welding Supervisor**  
QC13:2006 Specification for the Certification of Welding Supervisors & B5.9:2006 Specification for the Qualification of Welding Supervisors
- Certified Radiographic Interpreter**  
QC15:2008 Specification for the Certification of Radiographic Interpreters & B5.15:2003 Specification for the Qualification of Radiographic Interpreters
- Certified Welding Sales Representative**  
B5.14:2009 Specification for the Qualification of Welding Sales Representative & QC14:2009 Specification for the Certification of Welding Sales Representative
- Certified Welding Engineer**  
B5.16:2006 Specification for the Qualification of Welding Engineers

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

I hereby certify that I have read the standard requirements contained in the certification programs indicated above. 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 \_\_\_\_\_ 20\_\_\_\_.

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