

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 ON MY CERTIFICATION APPLICATION THAT WAS PREVIOUSLY SUBMITTED TO THE AWS CERTIFICATION BUSINESS UNIT.

Date: _____ Account No. (If known): _____

Last Name: _____ First Name: _____ MI: _____

Social Security No.: _____ - - Certification No. (If applicable): _____

TYPE OF APPLICATION:

- | | | |
|---|---|--|
| <input type="checkbox"/> Certified Welding Inspector | <input type="checkbox"/> Certified Welding Educator | <input type="checkbox"/> Renewal & Upgrade |
| <input type="checkbox"/> Senior Certified Welding Inspector | <input type="checkbox"/> 9-Yr Re-Certification | <input type="checkbox"/> 9-Yr Re-Certification-Exempt(QCW) |
| <input type="checkbox"/> 9-Yr Re-Certification Course (RSV) | <input type="checkbox"/> Reciprocity | |

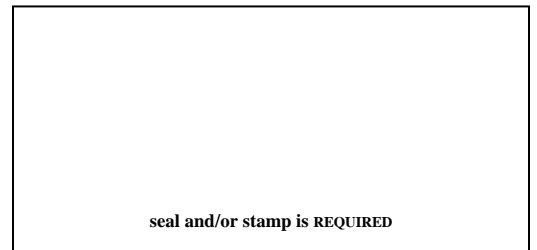
NOTARIZATION.

I hereby certify that I have read the requirements contained in the document *QC-1 Standard for AWS Certification of Welding Inspectors / QC-5 AWS Standard for Certification of Welding Educators*. Further, I agree to comply with the existing requirements and any subsequent requirements that may be instituted by AWS. 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.

Applicant's Signature _____ Sworn to and subscribed before

me this _____ day of _____ 200____. My commission expires _____

Notary Public Signature _____



seal and/or stamp is REQUIRED