For your convenience, please use our Candidate Registration Portal. Effective November 15th, 2019, applications sent to our headquarters by email or paper will be charged an additional $125.00.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
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<table>
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<th>Email</th>
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<th>Last Four Digits of SS#</th>
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1. Please check all that apply

2a. [ ] Exam Only
    OR
    [ ] Re-Exam  Complete Sections 1, 2, 3, 4, 5, and 8 of this application.

Choose Retest Parts that Apply:  
[ ] Part A – Fundamentals  
[ ] Part B – Practices & Economics

This exam will be offered all over the US in convenient locations using computer based testing with our partners at Prometric. After your application has been submitted and approved, you will be provided with an Authorization to Test (ATT) Letter in order to schedule your appointment through Prometric at one of their centers. A Prometric Seat Fee of $60.00 per exam will be added to the application cost.

Non-Exam Options

2b. [ ] 80 Personal Development Hours (PDHs).

2. Check and Complete the Following:

Have you obtained an AWS Certification?  [ ] Yes  [ ] No  
If yes, Certification #: ______________________________

Are you an AWS Member?  [ ] Yes  [ ] No  
If yes, Member #: _________________________________

3. Method Of Payment- ALL CHECKS AND MONEY ORDERS SHOULD BE MADE PAYABLE TO AWS. FEES  

<table>
<thead>
<tr>
<th>AWS USE ONLY</th>
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<tbody>
<tr>
<td>Acct #:</td>
</tr>
<tr>
<td>Date:</td>
</tr>
<tr>
<td>Amt $:</td>
</tr>
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PAYMENT MUST ACCOMPANY YOUR APPLICATION

[ ] Check or money order # ____________________________

[ ] VISA  [ ] MC  [ ] AMEX  [ ] Discover  
CVV: _______

CC#: __________ / __________ / __________ / __________  Exp: __________ / __________  
SIGNATURE ________________________________________________________________________

______________________________
4. Associations

**Type of Business** (check only ONE)

- [ ] Contract Construction
- [ ] Chemicals & Allied Products
- [ ] Petroleum & Coal Industries
- [ ] Primary Metal Industries
- [ ] Fabricated Metal Products
- [ ] Machinery Except Elect. (Incl. Gas Welding)
- [ ] Electrical Equip., Supplies, Electrodes
- [ ] Transportation Equip. - Air, Aerospace
- [ ] Transportation Equip. - Automotive
- [ ] Transportation Equip. - Boats, Ships
- [ ] Transportation Equip. - Railroad
- [ ] Utilities
- [ ] Welding Distributors & Retail Trade
- [ ] Misc. Repair Services (Incl. Welding Shops)
- [ ] Educational Serv.(Univ., Libraries, Schools)
- [ ] Engineering & Archit. Serv (Incl. Assns.)
- [ ] Misc. Business Serv.(Incl. Commercial Labs)
- [ ] Government (Federal, State, Local)
- [ ] Other

**Job Classification** (check only ONE)

- [ ] President, Owner, Partner, Officer
- [ ] Manager, Director, Superintendent (Or Assistant)
- [ ] Sales
- [ ] Purchasing
- [ ] Engineer — Welding
- [ ] Engineer — Other
- [ ] Inspector, Tester
- [ ] Supervisor, Foreman
- [ ] Welder, Welding Or Cutting Operator
- [ ] Architect, Designer
- [ ] Consultant
- [ ] Metallurgist
- [ ] Research & Development
- [ ] Technician
- [ ] Educator
- [ ] Student
- [ ] Librarian
- [ ] Customer Service
- [ ] Other
- [ ] Engineer - Design
- [ ] Engineer - Manufacturing
- [ ] Quality Control

**Tech. Interests** (check ALL that apply)

- [ ] Robotics
- [ ] Computerization of Welding
- [ ] Ferrous Metals
- [ ] Aluminum
- [ ] Non-Ferrous Except Aluminum
- [ ] Advanced Materials/Intermetallics
- [ ] Ceramics
- [ ] High Energy Beam Processes
- [ ] Arc Welding
- [ ] Brazing & Soldering
- [ ] Resistance Welding
- [ ] Thermal Spray
- [ ] Cutting
- [ ] NDT
- [ ] Safety & Health
- [ ] Bending & Shearing
- [ ] Roll Forming
- [ ] Stamping & Punching
- [ ] Aerospace
- [ ] Automotive
- [ ] Machinery Sheet Metal
- [ ] Marine
- [ ] Bending & Shearing
- [ ] Pipe & Tubing
- [ ] Pressure Vessels & Tanks
- [ ] Sheet Metal
- [ ] Structures
- [ ] Other
- [ ] Automation

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5. American with Disability Act Accommodations

☐ By checking this box, I am requesting special accommodations due to a disability. AWS is committed to complying fully with the ADA. Click here for a copy of the accommodations request package or visit http://bit.ly/1QseRd2.

Will you be using a glucose meter during your exam?  Yes ☐  No ☐

6. Qualifying Work Experience – Resumes not accepted.

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<th>Company Name</th>
<th>Type of Business</th>
<th>Company Phone Number</th>
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<th>Company Street Address</th>
<th>City, State, Zip Code</th>
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<table>
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<tr>
<th>Supervisor’s Name</th>
<th>Title of Immediate Supervisor</th>
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<th>Supervisor’s Email Address</th>
<th>Department</th>
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<tr>
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<th>Employed From:</th>
<th>To:</th>
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<tbody>
<tr>
<td></td>
<td>(Mo.) (Yr.)</td>
<td>(Mo.) (Yr.)</td>
</tr>
</tbody>
</table>

Job Responsibilities- Detailed Description Required

I attest to having evidence of continued activity in the occupational position of welding supervisor. I understand that work experience documented on this application will be verified with both past and present employers.

PLEASE DUPLICATE THIS PAGE IN ORDER TO MEET THE WORK EXPERIENCE REQUIREMENTS FOR CWS

7. Photo Requirements

Applicants MUST submit one (1) passport-style color photograph. Your photo is a vital part of your application. To learn more, review the information on how to provide a suitable photo to avoid processing delays by visiting our website. The acceptance of your photo is always at the discretion of the AWS.

Print your name and AWS membership number on the reverse of the photograph.

Photos copied or digitally scanned from driver’s licenses or other official documents are not acceptable.

DO NOT STAPLE OR PAPER CLIP PHOTO
8. Terms and Conditions - Please check, date, and sign below.

Certified Welding Supervisor

QC13 Standard for AWS Certification of Welding Supervisors.
B5.9 Specification of Qualification of Welding Supervisor.

☐ 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. 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, during, or after the exam as stated on the Candidate Attestation Agreement (Please click and read this link prior to accepting the Terms and Conditions. You will be required to sign this form on exam day). I understand that a violation of this oath may be grounds for invalidation of my certification and may be grounds for expulsion from any future testing.

Applicant’s Signature: ________________________________ Date: ________________________________

AWS Policies and Fees, please visit our website

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### 9. Continuing Education and/or Teaching Credit

*(Complete this section only if submitting 80 Personal Development Hours. Duplicate this page as necessary.)*

- A minimum of eighty (80) PDHs must be earned during the nine year certification period and twenty (20) of those 80 PDHs must be earned in the final three-year period.
- A PDH is no less than 50 minutes of personal interaction between a learner and instructor. Interaction implies two-way communication in order for the learner to receive feedback.
- A maximum of eighty (80) PDHs are allowed for any one course.
- PDHs claimed must be accompanied by a course description and certificate of completion indicating the number of contact hours.

#### Example:

<table>
<thead>
<tr>
<th>Institution or provider name and contact information:</th>
<th>Title of course or seminar:</th>
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</thead>
<tbody>
<tr>
<td>Sample Institution&lt;br&gt;1234 Street&lt;br&gt;Anywhere, US 54321&lt;br&gt;Phone: 999-555-1212</td>
<td>Welding Technology 101</td>
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<table>
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<tr>
<th>PDH</th>
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</table>

| PDH | DATE OF COMPLETION: |