

APPLICATION FOR AWARD OF DIPLOMA

Attach
Passport Size
Photo Here

Surname of Candidate: _____

First Name(s) in Full: _____

SAIW Student Number _____ Identity/Passport No: _____

Tel (w): _____ Fax: _____

Mobile No: _____ e-mail: _____

Postal/Residential Address: _____

_____ Code: _____

My nominated contact method for written communication is indicated here with a cross mark.

fax

e-mail

Post

QUALIFICATIONS HELD BY APPLICANT

Core Qualifications

Qualification	Yes	No	Date Qualification Obtained	Comments
Introductory Practical Welding and NDT. Attendance Record is adequate for this qualification. If you answer no please advise other introductory training which can be considered for waiver.				
SAIW Level 1 Welding and Fabrication Inspector				
SAIW Level 2 Welding and Fabrication Inspector				
ASME Codes of Manufacture				
SAIW Coatings Inspector Level 1				
SAQCC NDT Thickness Testing				
SAQCC PT 1, MT 1 and PT 2, MT2				
SAIW UT Awareness (SAQCC UT1 is acceptable here)				
SAIW RT Awareness (SAQCC RT 1 is acceptable here)				
SAQCC RT Interpreters				
SAIW Advanced NDT (this course is sometimes included in optional specification courses)				
Competent Person Pressure Vessels				
Competent Person Boilers				
Other Relevant Qualifications (please submit details of courses on a separate sheet of paper)				

Option Qualifications

State your Optional Field of Specialisation (e.g. Petrochemical and Refinery, Welding and Fabrication, Power Generation) _____

Qualification	Yes	No	Date Qualification Obtained	Comments
SAIW Optional Specialisation (e.g. Petrochemical and Refinery option)				

Other Relevant Qualifications

Complete details of any other qualifications you hold which may be relevant to your application. Please note you will be asked to provide details of all courses and examinations leading to qualifications not issued by SAIW. It is entirely the applicant's responsibility to obtain and provide this information but wait until requested to do so by SAIW.

Qualification	Date Qualification Obtained	Comments

Details of Practical Experience

Your Practical Experience Log Book must accompany this application. Original verification signatures are required. Please retain a certified copy for your own records.

Signature of Candidate: _____ Date: _____

I declare that the information given above is true.