

AWS Weld Test Registration Form

I hereby request to participate in certification testing for a certificate of the American Welding Society in accordance with the requirements of the American Welding Society. I certify that the following statements are true:

Section 1: Personal Information

Last Name: _____	First Name: _____	Middle Initial: _____
Date of Birth: _____	Phone Number: _____	
Email Address: _____		
Mailing Address: _____		
City/Town: _____	State: _____	Zip Code: _____
Photo ID Type: <input type="checkbox"/> Driver's License <input type="checkbox"/> Non-Driver's License	License ID #: _____	

Section 2: Employer Information (if applicable)

Company Name: _____	Supervisor Name: _____
Phone Number: _____	Email Address: _____

Section 3: Available Certification Tests & Fees

Code Certified Welder Testing*	Price	Your Cost
Please indicate which AWS Welding Code(s) for the selected tests (if unsure of exact code, please provide a brief description):		
<input type="checkbox"/> 1" Structural Plate Test One Position	\$300.00	_____
<input type="checkbox"/> 1" Structural Plate Test 3G and 4G	\$375.00	_____
<input type="checkbox"/> 3/8" Test Plate One Position	\$225.00	_____
<input type="checkbox"/> 3/8" Test Plate 3G and 4G	\$275.00	_____
<input type="checkbox"/> 2" Schedule 80 Pipe Test	\$400.00	_____
<input type="checkbox"/> 4" Schedule 80 Pipe Test	\$400.00	_____
<input type="checkbox"/> 6" Schedule 80 Pipe Test	\$400.00	_____
<input type="checkbox"/> 2" XXH Pipe Test	\$500.00	_____
<input type="checkbox"/> 4" XXH Pipe Test	\$500.00	_____
<input type="checkbox"/> 6" XXH Pipe Test	\$500.00	_____
<input type="checkbox"/> GMAW Sheet Steel Test – 10 Gauge One Position	\$200.00	_____
<input type="checkbox"/> GMAW Sheet Steel Test – 10 Gauge Two Positions	\$250.00	_____
<input type="checkbox"/> Specialty Alloys: _____	Call for price	_____
Destructive Testing Services**	Price	Your Cost
<input type="checkbox"/> Plate Coupons Description: _____	\$100.00 / Plate	_____
<input type="checkbox"/> Pipe Coupons Description: _____	\$125.00 / Pipe	_____
<input type="checkbox"/> Expedited Results	Call for price	_____

Other Services	Price	Your Cost
<input type="checkbox"/> Welding Booth Rental for Practice	\$50.00 / Hour	_____
<input type="checkbox"/> Practice Weldments – Structural	\$40.00 / Set	_____
<input type="checkbox"/> Practice Weldments – Pipe	\$65.00 / Set	_____
<input type="checkbox"/> Test Weldments – Structural	\$50.00 / Set	_____
<input type="checkbox"/> Test Weldments – Pipe	\$75.00 / Set	_____

*Group discounts are applied when there are seven or more Welders testing. High School Students, ask for additional discounts. Testing fees include destructive evaluations and reports.

**Destructive testing services include the following: visual inspection of, where applicable, root and cap, processing, and bending. A full report with results will be shipped in return. All weldments must be 8" in length to process, additional fees may apply if the weldment is not 8".

Section 4: Payment Information

Subtotal from Section 3:	_____
Fee for AWS Welder Certificate (when granted):	\$60.00
Total:	_____
Payment Method:	
<input type="checkbox"/> Self-pay	<input type="checkbox"/> Employer-sponsored
<input type="checkbox"/> Other: _____	
<p>Invoices will be generated by White Mountains Community College Financial Services upon enrollment. All certification materials will be mailed to the welder's home address unless specified to be mailed to the employer's address.</p>	

Section 5: Test Date & Location

<input type="checkbox"/> I will be attending the certification testing in-person.	<input type="checkbox"/> I will be mailing weldment coupons for certification.
Test Date Requested (please refer to wmcc.edu for list of available dates): _____	
Location of Testing Site & Mailing Address:	
<p>White Mountains Community College Workforce Development & Community Education Office 2020 Riverside Drive Berlin, NH 03570</p>	

Section 6: Signature

By signing below, I confirm that the information provided is accurate and that I agree to follow all safety procedures and testing policies established by the White Mountains Community College testing center.

Signature: _____ Date: _____

Any questions, please contact:

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Accredited Testing Facility Coordinator
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