

### New Welding Examiners Application Form

Please complete the details required and return the form to Linda Briggs at:

- **SummitSkills Ltd, Vega House, Opal Drive, Fox Milne, Milton Keynes, MK15 0DF**

Please note: All Examiners must possess a current Welding Competency awarded by Engineering Services SKILLcard.

1 **Name:** .....

2 **Present Employer:**  
**(name & address)** .....

**Telephone Number:** .....

**EMail:** .....

3 **Address for correspondence:**  
**(if different from above)**

**Telephone Number:** .....

a) <b>Current ESTTL/NJIC Certification Held:</b> <b>(tick as appropriate)</b>	<b>YES</b>	<b>NO</b>
Metal-Arc	<input type="checkbox"/>	<input type="checkbox"/>
Oxy-Acetylene	<input type="checkbox"/>	<input type="checkbox"/>
MIG	<input type="checkbox"/>	<input type="checkbox"/>
TIG	<input type="checkbox"/>	<input type="checkbox"/>

b) **Other certificates held (please attach copies of all certificates):**  
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.....  
.....  
.....

**4 Teaching or instructing experience in welding subjects – please give details:**

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.....  
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**5 Examination experience in welding for National Joint Industrial Councils, City & Guilds of London Institute, Insurance Companies or Contracting Companies:**

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**6 Industrial Experience in welding subjects – please give details:**

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**Signed:** ..... **Date:** .....

**7 Employer Referee:**

I certify that I have known..... for the past ..... years and regard him/her as a suitable person to act as an examiner in welding.

I would\*/would not\* be prepared to release him/her during business hours to attend examinations. (\*delete as appropriate)

**Signed:** .....

**Print Name:** .....

**Name of organistaion and position held (Principal/Head of Department/ Manager etc)**

.....  
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**Date:** .....