	Application for certification of NDT personnel	
	CERTIFICATION OF WELDING AND TESTING, s.r.o.	Designation FO 08
	C-WT Certification body for persons	Version 3
	Dlhá 88D, 010 09 Žilina Business ID 51 673 169	Valid from 5.6.2023

APPLICATION

for certification of NDT personnel according to EN ISO 9712: 2022

Filled by Certification Body C-WT	
Received on:	
Evidence number:	
Signature:	

Applicant details/certified person	
Name, surname, title:	
Date of birth:	Place of birth:
Address of Residence	Street, number:
	Town:
	Post code:
Tel./e-mail:	
Education/school:	

Employer	
Company name:	
Address	Street, number:
	Town:
	Postal code:
Business ID:	
Tax ID:	
VAT ID no.:	
Tel./e-mail:	

NDT method	Level	Industrial and product sector	Experience in days	Certification	Recertification
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

The minimum requirements for the length of experience in days are stated in STN EN ISO 9712: 2022, the number of days of experience is given as of the date of the qualification exam.

Recertification for Level 3 will be in the form of ¹⁾:

- ☐ written examination
☐ structured credit system FO 52

I apply for issuing certification ID card ¹⁾


☐ yes

☐ no

1) mark with a cross where applicable

2) in case of certification; training must be completed at a training center with a certificate of competency

3) cross out if not applicable

	Application for certification of NDT personnel	
	CERTIFICATION OF WELDING AND TESTING, s.r.o. C-WT Certification body for persons Dlhá 88D, 010 09 Žilina Business ID 51 673 159	Designation FO 08
		Version 3
		Valid from 5.6.2023

Choice of four NDT methods for Basic examination element for certification in the Level 3 (for part C of Basic exam), with at least one volumetric method:

Specific requirements (specific range of qualification, foreign language tests, adaptation to the personal needs of the applicant, if the law allows it, etc.):

.....


Overview of activities in the NDT method for which certification is required:

1. Confirmation of experience by employer:

At the period from-to:
Description of the work activities in which the applicant has gained experience and required knowledge (product types, NDT equipment and tools, working according to instructions, evaluation, drafting of instructions):
We confirm the veracity of these data: Place.....date..... name, function and signature employer's representative, stamp

2. Confirmation of experience performed at another organization (self-employed person):

Name and address of the organization, contact info:
At the period from-to:
Description of the work activities in which the applicant has gained experience and required knowledge (product types, NDT equipment and tools, working according to instructions, evaluation, drafting of instructions):
We confirm the veracity of these data: Place.....date..... Referee name, number of certificate, sign

	Application for certification of NDT personnel	
	CERTIFICATION OF WELDING AND TESTING, s.r.o.	Designation FO 08
	C-WT Certification body for persons	Version 3
	Dlhá 88D, 010 09 Žilina Business ID 51 673 159	Valid from 5.6.2023

PED certification (Directive 2014/68/EU) ¹⁾

☐ yes

☐ no

Length of experience on pressure equipment - Directive 2014/68 /EU (PED, only for a regulated sphere):

We hereby confirm that the applicant has been performing over 60 working days of NDT pressure equipment testing over a period of 12 months. With a greater number of methods, at least 15 business days have been spent on each required method. Periods of this practice are not older than 5 years.
The data confirms: Manufacturer of pressure equipment <input type="checkbox"/> Pressure equipment operator <input type="checkbox"/> Authorized person <input type="checkbox"/>
We confirm the veracity of these data: Place.....date..... name, position and signature of the authorized representative of the organization, stamp

Statement:

I certify the truth of the data I have provided. At the same time, I declare that I was informed pursuant to Article 13 and 14 of the Regulation 2016/679 of the European Parliament and of the Council on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, (General Data Protection Regulation) on rights and information concerning the protection of my personal data. I further declare that I will not provide confidential test materials to participate in a fraudulent way to get the test and to bring unauthorized devices to the place of examination.

Place.....date..... applicant signature.....


The following must be attached to the application

1. Confirmation about sufficient visual ability *FO 11*
2. Confirmation about completion of previous training ²⁾
3. A copy of the highest education certificate (if it affects the extent of the training or the length of the required experience)
4. Color photo in digital form – passport size, jpg file format (if asked to issue the certification ID card)
5. In case of recertification:
 - *FO 28 Evidence of continued satisfactory work activity* (all levels)
 - *FO 52 Structured credit system*, if chosen (Level 3)
 - *FO 61 Evidence of continued practical competence* (Level 3)

1) mark with a cross where applicable

2) in case of certification; training must be completed at a training center with a certificate of competency

3) cross out if not applicable

	Application for certification of NDT personnel	
	CERTIFICATION OF WELDING AND TESTING, s.r.o. C-WT Certification body for persons Dlhá 88D, 010 09 Žilina Business ID 51 673 159	Designation FO 08
		Version 3
		Valid from 5.6.2023

Checking the application in terms of completeness of required documents:	yes	no
Confirmation about completion of previous training ²⁾	<input type="checkbox"/>	<input type="checkbox"/>
Confirmation about sufficient visual ability	<input type="checkbox"/>	<input type="checkbox"/>
A copy of the highest education certificate	<input type="checkbox"/>	<input type="checkbox"/>
FO 28 Evidence of continued satisfactory work activity (in case of recertification all levels)	<input type="checkbox"/>	<input type="checkbox"/>
FO 52 Structured credit system (in case of recertification - if the system is chosen, Level 3)	<input type="checkbox"/>	<input type="checkbox"/>
FO 61 Evidence of continued practical competence (in case of recertification, Level 3)	<input type="checkbox"/>	<input type="checkbox"/>
Photo in digital form, jpg file, passport size (in case of certification ID card)	<input type="checkbox"/>	<input type="checkbox"/>
In Žilina, date..... Administrative worker CB C-WT.....		

Assessment of certification requirements:	satisfy	dissatisfy
completed previous training ²⁾	<input type="checkbox"/>	<input type="checkbox"/>
evidence of sufficient visual ability	<input type="checkbox"/>	<input type="checkbox"/>
FO 28 Evidence of continued satisfactory work activity	<input type="checkbox"/>	<input type="checkbox"/>
FO 52 Structured credit system	<input type="checkbox"/>	<input type="checkbox"/>
FO 61 Evidence of continued practical competence	<input type="checkbox"/>	<input type="checkbox"/>
In Žilina, date..... Head of examination CB C-WT		

Decision to issue a certificate
Based on all the prescribed conditions according to the relevant certification scheme, the results of the qualification exam and other submitted evidence, the head of the CB C-WT decided
to issue / not to issue ³⁾ certificate
Date:Head of CB C-WT.....
Test report.:
Certificate No.:
Certificate ID card No.:

Decision to issue a certificate PED
Based on all the prescribed conditions according to the relevant certification scheme, the results of the qualification exam and other submitted evidence, the head of the CB C-WT decided
to issue / not to issue ³⁾ certificate PED
Date:Head of CB C-WT.....
Test report.:
Certificate No.:

1) mark with a cross where applicable

2) in case of certification; training must be completed at a training center with a certificate of competency

3) cross out if not applicable