	Meena International Training and Certification Division Application for Candidates Gaining Experience Post Examination	Form No. 29
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For Examination Meeting the Requirements of ISO-9712

1. General Information: -

Full Name: (As given in ID proof submitted)	
Last name / Surname	
Permanent Address:(Including Door No, Street, City, District, Province, State, Country & Post Code)	
Address for Communication: (Address to which all certificate related communication to be sent to) (Including Door No, Street, City, District, Province, State, Country & Post Code)	
Date of birth: (dd/mm/yyyy)	
Contact Number:(With Country and Area Code)	
E-Mail:	
ID Proof Reference: (Type & ID Number)	

2. Employment and Experience Details: -

Employer Name & Address:(Company name, Door No, Street, City, District, Province, State, Country & Post Code)	
Years of Experience:	
Contact Details of Immediate Supervisor for Employment Verification:	


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3. Training Details: -

NDT Method & Level Attempted:		
Name of the Training Provider:		
Training Dates:	From:	To:
Training Hours:	Theory:	Practical:
Result Reference Number:		
Examination Date:		
Student Signature & Date:		

4. Record of Employment (Post certification): -

Name of Organization	Period of Employment	Company Name and Contact person for verification

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5. Verification of Candidate's Statement:

Check for the following details: (Please tick the boxes)

1.	A Valid Vision Test Certificate	
2.	All pages have been filled and appropriate information has been provided	
3.	Record of Experience	
4.	Application is completed in less than 2 years from the date of exam	

The details provided by the candidate in this form are true to the best of my knowledge:

Name:

Signature

Company

Contact Number

Note:

- If the candidate who has taken the exam when he was fresher and is now self-employed, the above form shall be signed by a referee with a valid ISO-9712 / ASNT Level-3 certificate in the relevant method.
- If the candidate is employed, the form can be signed off by his immediate superior with a valid ISO-9172 / ASNT Level-3 certificate in the relevant method.
- The employer/referee who has signed the document shall have the minimum experience required by the IPC Scheme.
- The copies of certificate of the person signing the document shall be attached with this form.



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Verification of eligibility criteria:

Candidate's name: - _____

Unique ID number: - _____
 (If available)

Inspection method	Inspection Technique	Details of application, standards, procedure, code	Experience gained		Details of Supervisor
			From	To	
					Name of supervisor: Supervisor Designation: Telephone no: Email ID: Signature & Stamp:

***Note: - Candidate must meet the requirements of ISO – 9712 examination eligibility criteria.**

Application Reviewed for compliance with eligibility criteria for taking the IPC Examination:	Application Approved		Application Rejected	
Reviewed By:	Signature and Date:			
Name:				
Comments: (shall include reason if application is rejected)				