

Request for Welder Testing

The following form **must be** completed in order for welder testing to be done at the Boilermaker Learning Centre. Please submit completed form to:

John Gras, Welding Examiner & Instructor

E-Mail: jgras@boilermakers.ca

Fax: (780) 702-1724

Company Information

Company:		Project Name:	
Billing Address:		PO#:	
City:		Postal Code:	
Contact:		Phone No.:	
E-Mail:		Cell No:	

Testing Requirements:

No. of Welders:		Start Date:	
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Up-to-Date Tickets:

Tickets within 6 months acceptable Tickets within 12 months acceptable Other (please specify)

Test Details:

Type of Weld Test	WPS#	No. of Welders	Comments
F3-F4			
F3-F4 Heavy Wall			
F6-F4			
F6-F4 Heavy Wall			
F6			
F6-F5			
F5			
F4 Downhand			
F43			
CWB*			
Other			
Other			

Additional Information:

* Please check course calendar for CWB test dates.

Should you have any questions please call (780) 451-5992 Ext. 238