

# V2 CONSULTING LIMITED

## APPLICATION FOR WELDER QUALIFICATION

### INFORMATION TO BE PROVIDED BY CANDIDATE (complete parts 1 to 6 inclusive)

If uncertain of the requirements, consult V2CL or the Examination Centre before proceeding. This application form asks for specific details on experience and training and must be signed to the effect that these details are correct. In the event of a false statement being discovered, any certification awarded as a result of the examination will be null and void. Please complete all of the following parts.

#### PART 1. CANDIDATE'S PERSONAL DETAILS

Family name:		Given names:	
Candidate's usual residence, including post code (address that will be shown on the certificate):		Address, including postcode, to which the ICP certificate, when issued, is to be sent.	
<b>CANDIDATES SIGNATURE AUTHORIZING CERTIFICATE TO BE SENT TO ABOVE ADDRESS:</b>			
Telephone number:		ICP number:	
E-mail address:		Date of birth (dd/mm/yyyy):	
Gender (optional):			
It may be possible to make provision in ICP examinations for disabled candidates. If you are disabled, please bring this fact to the attention of the examining body.			

#### PART 2. CURRENT EMPLOYMENT DETAILS (Part 7 of form V2\_GE01E if necessary should be used to record past employment.)

Employer's name and address (if self employed, state this here):	
Post code:	Email:
Candidate's position in the organization:	Manager or supervisor's name:

#### PART 3. EXAMINATION APPLIED FOR (provide information indicated or tick relevant boxes)

Preferred examination date and venue:					
Code, specification or standard ( <i>in full</i> ) chosen for use in Welder examinations:					
Initial examination		Retest		Recertification	



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### PART 4. PRE-CERTIFICATION TRAINING

Attach evidence of satisfactory completion of ICP approved training course or provide the following details for training;

Name of training organisation and title/reference of relevant training course:	
Dates of course (from/to):	

### PART 5. EXPERIENCE (please provide a brief description of the nature and duration of your employment as a welder or trainee, continue on a separate sheet or use part 7 of form V2\_GE01E if necessary.


### PART 6. CANDIDATE'S STATEMENT CONFIRMING ELIGIBILITY FOR EXAMINATION

I have read and understand ICP Requirements for the certification of personnel engaged in Inspection, particularly the criteria for eligibility, and hereby confirm that I satisfy those criteria covering vision, training and experience. In the event that I should be awarded ICP certification, I agree to comply with the ICP Code of Ethics (published as ICP document V2\_GE06).

I understand that, in the event of a false statement being discovered, any certification awarded as a result of the examination will be null and void. I accept responsibility for payment of examination fees in the event of non-payment by the sponsor.

**NOTE:** V2CL will store and use the information given on this form only for the purpose for which it has been provided. Your personal details and any other data you provide to V2CL will not be passed on to a third-party without your permission.

V2CL would like to contact you from time to time to let you know about its other services that may be of interest, such as special offers and discounts, events and new products. If you are happy to be contacted by V2CL, please indicate by ticking the box below:

I am happy for V2CL to contact me with information that may be of interest [  ]

You can subscribe or unsubscribe at any time, simply let us know.

SIGNATURE: .....

DATE: .....

#### Attach

- a. Vision test certificate (V2\_GE02 may be used) unless vision test arranged at Examination Centre
- b. Evidence of experience
- c. Correct examination fee (unless part 8 of this form is appropriately completed); details of fees are available from the examination centre.

#### Bring

- d. One passport photograph (unless already a holder of an ICP identity card issued within the past 10 years, or if photographs are to be taken at the Examination Centre - check beforehand if facilities are available on site)
- e. Your ICP record of certification and ICP identity card (if already an ICP certificate holder)



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### PART 7. VERIFICATION OF CANDIDATE'S STATEMENT BY THE SPONSOR, EMPLOYER OR, IF THE CANDIDATE IS SELF-EMPLOYED, A REFEREE.

To the best of my belief, the candidate's statement given in part 6 is correct at the time of signing.

NAME: ..... SIGNATURE:.....

COMPANY:..... EMAIL:.....

TELEPHONE: .....

### PART 8. PAYMENT (complete applicable sections only)

The payment can be in the form of cheque payable to "V2 Consulting Limited" or swift transfer to bank account, "The Hong Kong and Shanghai Banking Corporation, 033-348541-838 and the swift code is HSBCHKHKKH.

#### Payment type (please tick & complete as appropriate)

Cheque Enclosed?		Bank Transfer		Purchase Order Number	
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### FOR USE BY THE EXAMINATION CENTRE

EXAMINATION DATE: ..... EXAMINATION VENUE: .....

EXAMINER: ..... INVIGILATOR: .....

PAYMENT RECEIVED: ..... RESULT REFERENCE: .....

EXAMINATION FILE COMPLETE AND CLOSED (initials/date): .....

REMARKS (if any verification sought and obtained, record details below):