**APPLICATION FORM FOR NDT CERTIFICATION**

**IN THE METAL MAGNETIC MEMORY TECHNIQUE**

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| --- | --- | --- | --- | --- | --- | --- |
| Applicant company / private person | |  | | | | |
| Present office address / permanent address | |  | | | | |
| Telephone: |  | | Fax: |  | e-mail: |  |

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| requests the NDT Personnel Certification Body of Energodiagnostika Co. Ltd. to carry out (*mark* ‘Х’ *any one*): | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | initial certification | | | | | | | | | | | |  | | | recertification | | | |
|  | | renewal | | | | | | | | | | | |  | | | revalidation | | | |
| First Name, Surname | | | | | | | |  | | | | | | | | | | | | | | | | |
| Mr. | |  | | | Mrs. | |  | | | Ms. | | |  | | | Date of Birth | | | | | |  | | |
| in the metal magnetic memory method for the qualification level (*mark* ‘Х’): | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | | Level I | | |  | | Level II | | |
| Industrial sector: | | | | | | | | | 2 - Pre- and in-service testing which includes manufacturing | | | | | | | | | | | | | | | |
| Product sectors (*mark ‘*Х’): | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | c - castings | | | | | | | |  | t - tubes and pipes | | | | | | | |  | | wp - wrought products | | |
|  | | f - forgings | | | | | | | |  | w - welds | | | | | |  | | | | | | |
| Experience of practical work by the MMM method | | | | | | | | | | | | | | | | | | |  | | | | years | |
| Experience of practical work by  other NDT methods | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | *(indicate the method and experience)* | | | | | | | | | | |
| Additional training in the non-contact inspection of buried pipelines based on the MMM technique (NCMMM) is required (*mark* ‘Х’): | | | | | | | | | | | | | | | | | | | | | | | | *Basic course* |
| *Extended course* |

**The candidate for certification should submit the following documents to the PCB of Energodiagnostika Co. Ltd.:**

1. Original application form signed by present employer with official seal.
2. Copy of the document about the basic education (diploma, certificate, etc.).
3. Vision examination certificate. It shall be administered by an ophthalmologist. The visual examination date must be within 12 months of the date that this form is signed.
4. Certificate of NDT experience in the MMM method (if any), signed by present employer with official seal.
5. Certificate of NDT experience in any NDT method (if any), signed by present employer with official seal.
6. Copies of NDT certificate/s (if any).
7. 2 color photos (size 30×40 mm, mat surface).

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| Date: |  | **Signature of the present**  **employer with designation and**  with official seal |  |