

Indian Society for Non-Destructive Testing



National Certification Board



Application for Revalidation of

NDT Level I / II Certificate

(Please fill the Application form in bold letters or by Typing)

ISNT Mem. No. : Chapter affiliation:

Name (in full) :

Age & Date of Birth :

Permanent Address :

Present Office Address :

Paste one
Photograph in
this space and
one additional
photo to be
attached
separately with
the form

Address for Correspondence :

I have enclosed my Level Certificates in original method. I hereby request that my Certificate be Revalidated for a further period of three years. I enclose the Recertification fee of Rs (in words -----) by Cheque/Draft No.....
I will abide by the regulations set by ISNT for this/this Recertification

Place:

Date:

Signature of the applicant.

EDUCATIONAL QUALIFICATIONS

School Education (Give details of highest examination passed)

| <i>Sl. No.</i> | <i>School</i> | <i>Examination passed</i> | <i>Year</i> |
|----------------|---------------|---------------------------|-------------|
| 1. | | | |
| 2. | | | |

COLLEGE EDUCATION

| <i>Sl. No.</i> | <i>College / University</i> | <i>Course Studied</i> | <i>Exam Passed</i> | <i>Year</i> |
|----------------|-----------------------------|-----------------------|--------------------|-------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

NDT TRAINING COURSES ATTENDED

| <i>Sl. No.</i> | <i>Course</i> | <i>Conducted by</i> | <i>Dates</i> | <i>Duration in hours</i> |
|----------------|---------------|---------------------|--------------|--------------------------|
| 1. | | | | |
| 2. | | | | |

Note: Please Attach Attested certificates / Photocopies for the examination passed / courses attended

NDT CERTIFICATES OBTAINED (Attached photocopies of certificates).

| <i>Sl. No.</i> | <i>Method</i> | <i>Level</i> | <i>Date of certificate</i> | <i>Issued by</i> |
|----------------|---------------|--------------|----------------------------|------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |

WORK EXPERIENCE SUMMARY

| <i>Sl. No</i> | <i>Employers' Name</i> <i>Address</i> | <i>Position</i> | <i>From</i> | <i>To</i> | <i>Duration</i> <i>Year Month</i> | <i>Job Description</i> <i>(specify also the</i> <i>NDT methods used)</i> |
|---------------|--|-----------------|-------------|-----------|--------------------------------------|--|
|---------------|--|-----------------|-------------|-----------|--------------------------------------|--|

Note: Experience may be gained simultaneously in two or more methods of NDT. Applicant must have spent atleast 25% of the work time on the method for which examination is being taken.

PRESENT EMPLOYMENT :

Name & Address of the Employer :

Present Position :

Job Description :

NDT Equipment Used :

Nature of Jobs Tested :

I hereby certify that all the facts given with reference to my educational qualifications, NDT courses attended and to my work experience are true to the best of my knowledge and belief and that I have not withheld any information which might be detrimental.

Date:

Signature of the Applicant.

It is certified that the information given by the applicant with reference to his present work experience is correct.

Date:

Signature of the Present
Employer with Designation
And with Official seal.

Eye Fitness Certificate

Name of the Candidate :

Address:

Date of Birth:

Organisation:

Distant Vision: Corrected / Natural

Left Eye: Right Eye

Near Vision: Corrected / Natural

Left Eye: Right Eye:

Colour Vision:

Remarks of the Eye Specialist whether the Candidate meets the requirements of the standards. (Please see extract of the standards below) Yes / No.

Signature of Eye Specialist.

Regd. No.

Address

Seal

Place:

Date:

Vision Requirements Extract from BIS Standard

The Candidate shall provide documented evidence of satisfactory, vision, in accordance with the following requirements.

- a) Distant vision shall equal smaller than fraction 20/30 or better in at least one eye, either uncorrected or corrected.
- b) Near vision shall permit reading a minimum of Jaeger number 2 or equivalent type and size letters at not less than 80 cms on a standard Jaeger test chart for near vision, in at least one eye, corrected or uncorrected.
- c) Colour vision shall be sufficient that the candidate can distinguish and differentiate between the colours used in the NDT method concerned and colour vision to be tested as per ISHIHARAS charts.

1. Application fee is as shown below:

Rs.500/- for one certificate

Enclosure:

DD for application fee in favor of '**NCB-ISNT**' payable at **Chennai**.