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QUALIFICATION EXAM ENROLLMENT FORM

Please complete and fax, mail or email form to TEST NDT

1. Course(s) required
2. Dates
3. Name of attendee(s)
4. Company name
5. Address
6. City, ST Zip
7. Phone #
8. Fax #
9. Email address
10. Contact person

\$250 per single part of examination.
\$500 for General / Specific / Practical taken together.
\$50 discount per part if taken in conjunction with training course.

Qualification Examination(s):

- | | | | | | |
|--|-----------------------------|---|-----------------------------|--|-----------------------------|
| <input type="checkbox"/> ET | <input type="checkbox"/> MT | <input type="checkbox"/> PT | <input type="checkbox"/> RT | <input type="checkbox"/> UT | <input type="checkbox"/> VT |
| <input type="checkbox"/> Level 1 | | <input type="checkbox"/> Level 2 | | <input type="checkbox"/> Level 3 | |
| <input type="checkbox"/> General Examination | | <input type="checkbox"/> Specific Examination | | <input type="checkbox"/> Practical Examination | |

Level 3 Practical has to include Procedure Prep

Primary Business Sector: Aerospace Petrochemical Structural Welding

Applicable Certification Program:

SNT-TC-1A NAS-410 CP-189 Other: _____

Do you need to comply with NADCAP?: Yes No

Preferred Date for Examination(s): _____ Optional Date: _____

Applicable Codes/Specifications/Standards/Acceptance Criteria:

_____	_____
_____	_____
_____	_____

Please have your Level III sign this form above, then send (fax or email) back to TEST NDT.