



Certificate No: 35/3  
ANB-IND

# The Indian Institute of Welding-ANB

Authorised National Body of the International Institute of Welding in India

IIW-India House, Plot: 38Geetanjali Park Main Road

200, Kalikapur Road, P.O.Mukandapur,Kolkata – 700 099

Tel: +91 33 4006 1837, E-mail:[anb@iiwindia.com](mailto:anb@iiwindia.com), Web: <http://www.iiwindia.com>

## **Preliminary Information FORM to be filled by the Applicant** **for Eligibility Determination IIW-(International) Qualification**

**(Before submission of formal Application FORM along with Fees as applicable)**

1. FULL NAME: .....  
(In CAPITAL LETTERS WITH CORRECT SPELLING)
2. Place of Birth & Date of Birth: Place:.....DOB .....
3. Name of Father/ Mother.....
4. Postal Address: .....  
.....
5. Contact Mobile Nos.:.....  
e-mail:..... Skype.....
6. For Overseas Applicants
  - a. Address in India if available .....
  - b. Contact person & Tel number in India if available.....
7. Interested to Qualify as: (please ✓ or highlight any one or more after checking our Brochure and visit to our website link:<http://iiwindia.com/personnel-qualification-certification/>)
  - a. **INTERNATIONAL WELDING COORDINATION PERSONNEL**

IWE	IWT	IWS	IWP
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  - b. **INTERNATIONAL WELDER:**

IFW	IPW	ITW
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  - c. **Welding Processes:**

MMA	MIG/MAG	TIG
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8. Admission to ATB for Standard Route or by Alternative Route/Transition Arrangement
9. Academic Qualifications (from Class X onwards in India/overseas)

S. No.	Examination Passed	Board / Institute / University	Specialisation if any	Course duration (Mention if by distance mode)	Year of Passing
1					
2					
3					
4					
5					
6					

**10. Details of other Professional Examinations Passed or training received in Welding and related subjects and skills.**

S. No.	Examination Passed Training received	Organisation/ Institution	Specialisation	Course duration (Mention if by distance mode)	Year of Passing
1					
2					
3					
4					
5					
6					

**11. Details of Employment with current on top (chronologically in descending Order)**

S. No.	Name of Employer (Country of posting)	Status / Position	Job responsibility & function	Duration: dates		
				From	To	Months
1						
2						
3						
4						
5						
6						

**12. Core Experience (please ✓ any one or more based on your own assessment)**

<b>Production &amp; Manufacturing</b>	<b>Welded Fabrication</b>	<b>Construction</b>	<b>QA</b>
<b>Training &amp; Education</b>	<b>Product Marketing &amp; Services</b>	<b>R &amp; D</b>	

**13. I confirm that the information provided above are complete & correct and I shall submit Formal Application along with all supporting documents & application Fees. I understand that any communication from IIW-India ANB, based on the information provided **does not confirm eligibility** but only facilitates the application to be placed before the IIW India-ANB Assessment Committee regarding my eligibility following applicable IIW-IAB Rules & Guidelines which is final and binding on me.**

Place: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Candidate**FOR OFFICE USE ONLY**

Comment after preliminary check for further action: