



The Indian Institute of Welding-ANB
 Authorised National Body of the International Institute of Welding in India
 3A, Dr. U. N. Brahmachari Street, Kolkata – 700 017, India.
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**APPLICATION FORM FOR ADMISSION TO IWE/IWT/IWS/IWP
 BY TRANSITION ROUTE**

Part – A

1. Name: _____
2. Date of Birth (dd/mm/yyyy): _____
(Enclose attested copy of date of birth)
3. Mailing Address: _____

**Paste attested
 Photograph
 (Passport Size)**

Phone No. (City Code + No.): (Off): _____ (Res): _____

Email id: _____

4. Application under Transition Route for course (please \surd any one): IWE / IWT / IWS / IWP
5. Details of crossed D.D. Enclosed: No.: _____ Date: _____ on Bank
_____ for Rs. _____.
6. Are you a member of the Indian Institute of Welding? Yes | No
7. If yes, Membership Number _____.

“I understand that by applying through the Transition Route and after acquiring the diploma I will be responsible for its correct use and shall take measures to prevent misuse such as modifications of its content. In the case of misuse the ANB can initiate legal activities against the diploma holder”.

Date: _____

Signature

FOR OFFICE USE ONLY

REGISTRATION NUMBER ALLOTTED:

Part – B

8. Academic Qualifications (from Class X onwards).

S. No.	Examination Passed	Board / Institute / University	Specialisation	Year of Passing	% Marks / Grade Point obtained
1.					
2.					
3.					
4.					
5.					

- N.B.:**
1. Enclose attested copies of Certificates and Mark Sheets.
 2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

9. Details of other Professional Examinations Passed.

S. No.	Examination Passed	Organising Institution	Specialisation	Year of Passing	% Marks / Grade (if any)
1.					
2.					
3.					

- N.B.:**
1. Enclose attested copies of Certificates and Mark Sheets.
 2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

10. Details of additional Training in welding undergone

S. No.	Name of Training	Name of Organisation	Duration		Details of Certificate(s) obtained
			From	To	
1.					
2.					
3.					

- N.B.:**
1. Enclose attested copies of Certificates and Mark Sheets.
 2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

11. Details of Employment

S. No.	Name of Employer	Status / Position	Duration		Nature of Duties	Reasons of Leaving
			From	To		
1.						
2.						
3.						

- N.B.:**
1. Enclose attested copies of Certificates and Mark Sheets.
 2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

12. Enclose a curriculum vitae (C.V.) / resume containing professional information, including

- Evidence of education / training courses passed / attended, after Diploma / Degree / Technician Certificate / ITI Training.
- Evidence of job function(s) after Diploma / Degree / Training course, including position(s) held, job(s) executed, and the level of responsibility (Welding Engineer / Welding Technologist / Welding Specialist / Welding Practitioner).
- Any other relevant professional achievement(s):

P.S.: Enclose attested copies of documents in support of the above.

13. List of Enclosures (number the enclosures).

- (1)
- (2)
- (3)
- (4)
- (5)
- (6)
- (7)
- (8)

14. Declaration: I have read the Prospectus, and I agree to abide by the Rules and Regulations concerning assessment for IWE / IWT / IWS / IWP (please \sqrt any one) under Transition Route.

Place: _____

_____ *Signature*

Date: _____