



# THE INDIAN INSTITUTE OF WELDING

(A Member Society of The International Institute of Welding)

Head Quarter & Regd. Office Address:

“MAYUR APARTMENTS”, Flat No. 4 B/ N,

3A, Dr. U. N. Brahmachari Street, Kolkata - 700 017, INDIA

Phone: 91 33 2281 3208 | Telefax: 91 33 2287 1350

E-mail: [indianwelding@vsnl.net](mailto:indianwelding@vsnl.net) | Website: <http://www.iiwindia.com>

## REGISTRATION FORM FOR AM-IIW EXAMINATION

*Please Fill in BLOCK Letters*

Paste  
Attested  
Photograph

1. Name: \_\_\_\_\_

2. Father's Name: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_

4. Mailing Address: \_\_\_\_\_

Pin-Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone No.: \_\_\_\_\_

5. Academic Qualification (From Secondary level and above):

|    | Examination Passed | Board / Institution's Name | Year of Passing | % of Marks |
|----|--------------------|----------------------------|-----------------|------------|
| A. |                    |                            |                 |            |
| B. |                    |                            |                 |            |
| C. |                    |                            |                 |            |
| D. |                    |                            |                 |            |
| E. |                    |                            |                 |            |

**N.B.:** Attested Copies of Certificates & Marksheets must be enclosed.

6. Employment Details:

|    | Organisation Name | Status | Nature of Duties & Year of Experience |
|----|-------------------|--------|---------------------------------------|
| A. |                   |        |                                       |
| B. |                   |        |                                       |
| C. |                   |        |                                       |

**N.B.:** Supporting Documents of Experience must be enclosed.

7. Have you any training in the field of Welding (if Yes, give details and enclose Certificates):

**8. Exemption sought in the Subjects:**

*(Enclose attested copies of Mark Sheets, and Syllabi of Subjects studied in the Qualifying Examination)*

| S. No. | Subject Code No. | Name of the Subject | Supporting Documents Enclosed |
|--------|------------------|---------------------|-------------------------------|
| 1.     |                  |                     |                               |
| 2.     |                  |                     |                               |
| 3.     |                  |                     |                               |
| 4.     |                  |                     |                               |
| 5.     |                  |                     |                               |
| 6.     |                  |                     |                               |
| 7.     |                  |                     |                               |
| 8.     |                  |                     |                               |

9. Membership No.: \_\_\_\_\_

10. Attached to I.I.W. Branch: \_\_\_\_\_

Registration Fee of Rs.500/- by Crossed DD in favour of "The Indian Institute of Welding", payable in Kolkata is to be enclosed.

Crossed Demand Draft No.: \_\_\_\_\_

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

Amount: \_\_\_\_\_

On (Bank) \_\_\_\_\_

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

\_\_\_\_\_  
*Signature of the Candidate*

**FOR OFFICE USE ONLY**

Registration No. Allotted:

Rejected (with reasons):

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

\_\_\_\_\_  
*Controller of Examinations*