

FORMAT OF PRELIMINARY APPLICATION BY THE PROSPECTIVE ATBs'

- 1) Name of the Organisation

- 2) Nature of Ownership (Pl. \surd any one)
(a) Proprietary (b) Partnership (c) Public Ltd. Co. (d) Pvt. Ltd. Co.

- 3) Registration No.: _____

- 4) a) Address of Registered Office: _____

- b) Address of Head Office: _____

- 5) Nature of Present Business: i) _____
 ii) _____
 iii) _____

- 6) Briefly describe the facilities you have for Welding Training
 - i) Land & Building Area

 - ii) Lecture Halls
 - a) No. of Halls
 - b) Area
 - c) Seating Capacity
 - d) Facilities

 - iii) Welding Workshop
 - a) Area

b) Details of Equipment

- i) MMAW
- ii) MIG / TIG
- iii) SAW
- iv) Metal Cutting

c) Faculty & Instructor

Give the details of each person along with their academic background and work experience.

7) Course you want to conduct:

- a) International Welding Engineer
- b) International Welding Technician
- c) International Welding Specialists
- d) International Welding Practitioner
- e) International Welder

8) a) Who are the target students

b) How many participants you expect

Sl. No.	Course	1 st year	2 nd year	3 rd year
(i)	International Welding Engineer			
(ii)	International Welding Technician			
(iii)	International Welding Specialists			
(iv)	International Welding Practitioner			
(v)	International Welder			

9) Any other information you would like to furnish in support of your application.

10) Payment details of Application sent: Cheque / D.D. No. _____ dated _____
drawn on _____ for Rs. _____

Authorised Signatory