



## Application Form for End Point Assessment for Welders

Training Provider Address and Contact Details:		
Company Contact Details, if Applicable:		
Apprentice name:	Level 2                      please complete 2 forms Level 3                      please complete 3 forms	Module Number:
ULN No:		
Date of Birth:		
WPS No:	Please attach copy of Welding Procedure Specification (if available)	
Proposed date for EPA :		

Applicable Standard	✓
BS EN ISO 9606-1	
BS EN ISO 9606-2	
ASME IX	
AWS D1.1	
Other:	

Type of Joint		✓
Fillet Weld		
Plate Butt Weld		
Pipe Butt Weld		

Material	✓	Thickness (mm)	Diameter (mm) (if applicable)
Carbon & Low Alloy Steel			
Austenitic Stainless Steel			
High Alloy Ferritic/ Martensitic Steels			
Nickel			
Nickel Alloys			
Aluminium			

Welding Process		✓
MMA (111)		
TIG (141)		
MIG (131)		
MAG (135)		
FCAW (136)		
SAW (121)		

Positions				✓
PA		PG		
PA Rotated		PF		
PB		PH		
PC		PJ		
PC Rotated		H-L045		
PD		J-L045		
PE				

Signature (*Candidate/Training Provider\**) \_\_\_\_\_  
\*delete as applicable

**For TWI CL use only**

Visually acceptable                      Yes/ No\* (\*delete as applicable)    Failure report attached

Name of Authorised Examiner \_\_\_\_\_ CSWIP Certificate No: \_\_\_\_\_

Signature \_\_\_\_\_