



Company Code: \_\_\_\_\_

## Engineer's Declaration and Resume

Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

This declaration will confirm that I have been designated by:

\_\_\_\_\_  
Name of Company/Plant/Division to Which Certification Applies

\_\_\_\_\_  
Address

as their welding engineer under the following CSA Standard (submit an additional form if designated for more than one standard):

- CSA W47.1       CSA W47.2       CSA W55.3

Or

Under CSA Standard W186 as the engineer responsible for:

- Welding Design       Welding Procedures and Practice

For acceptance, engineers must meet the requirements specified in the applicable standard.

I am:  retained, OR  employed full-time by the above company

I have been previously accepted by the CWB to the applicable Standard:  YES       NO\*

\*If "NO", you are required to complete side 2 of this form and provide supporting evidence of qualifications.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date (MM / DD / YYYY)

All applicants will receive a complimentary Basic CWA Membership. Check this box if you do not wish to receive this membership.

- Note:**
1. **Engineers who have not been previously accepted to the applicable standard must also complete side 2 and provide the required supporting documentation.**
  2. **Submit an additional form, if designated for more than one standard.**

**FOR CWB USE ONLY:**

First time review for this engineer:  Yes       No

If yes, also complete CWB Form 640

Registrar: \_\_\_\_\_

\_\_\_\_\_  
DATE (MM / DD / YYYY)

I am a Registered Professional Engineer in the: \_\_\_\_\_ Province/Territory/State of: \_\_\_\_\_

Registration/License No.: \_\_\_\_\_

**EDUCATION:**

University	Faculty & Major Area of Study	Degree Obtained	Year of Graduation

Attach documented proof of successfully completed courses of study in the following subject areas (as applicable):

- |   |  |
|---|--|
| <input type="checkbox"/> Basic knowledge of steel                       | <input type="checkbox"/> Basic knowledge of aluminum                       |
| <input type="checkbox"/> Welding fundamentals - steel                   | <input type="checkbox"/> Welding fundamentals - aluminum                   |
| <input type="checkbox"/> Welding metallurgy - steel                     | <input type="checkbox"/> Welding metallurgy - aluminum                     |
| <input type="checkbox"/> Welding procedures and practice - steel        | <input type="checkbox"/> Welding procedures and practice - aluminum        |
| <input type="checkbox"/> Applicable welding codes and standards - steel | <input type="checkbox"/> Applicable welding codes and standards - aluminum |

**WORK EXPERIENCE (As a minimum list all employers over the past 5 years)**

Name of Employer (List most recent employer first)	From		To		Title or Position
	MM	YYYY	MM	YYYY	
			Present		

Attach documented proof describing all relevant welding related work experience. Include all experience related to welding procedure development, welding inspection, welding design, weld failure investigations, practical welding experience, welding related courses, etc. Provide dates if applicable. Attach additional sheet if required.

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