

**SAMPLE FORM FOR WELDER AND WELDING OPERATOR QUALIFICATION TEST RECORD
(For Carbon, Low Alloy, and Stainless Steel Sheet Metal)**

Welder or welding operator's name _____
 Identification no. _____ Qualification Date _____

In accordance with WPS no. _____ Revision _____
 Welding process(es) _____ Type _____
 (Automatic, manual, etc.)
 Mode of transfer for GMAW _____
 (Short circuiting, spray, globular)

VARIABLE	ACTUAL VARIABLE USED IN QUAL.	QUALIFICATION RANGE
JOINT		
Joint type	_____	_____
Backing material type	_____	_____
Groove welded from:		
One side or both sides	_____	_____
BASE METAL		
Material specification:		
Sheet steel	_____ to _____	_____ to _____
Supporting steel	_____	_____
Sheet thickness:		
Groove	_____	_____
Fillet	_____	_____
Arc Spot	_____	_____
Arc Seam	_____	_____
COATING(S)		
Type	_____	_____
Thickness	_____	_____
POSITION		
Groove	_____	_____
Fillet	_____	_____
Arc Spot	_____	_____
Arc Seam	_____	_____
Progression	_____	_____
GAS		

ELECTRODE		
Size	_____	_____
Group Designation	_____	_____

VISUAL EXAMINATION RESULTS

Specimen 1 _____ Specimen 2 _____
 Appearance _____ Cracks _____ Undercut _____
 Reinforcement _____ Diameter of arc spot nugget _____
 Test conducted by _____ Per _____
 Laboratory test no. _____ Date of test _____

The undersigned certifies that the statements in this record are correct and that the test welds were prepared and tested in accordance with the requirements of AWS D15.1: (_____), *Railroad Welding Specification for Cars and Locomotives*.
 (year)

Company _____ Authorized by _____