EACH TEST PLATE MUST HAVE ITS OWN ROUTING SHEET

ROUTING SHEET & WELDER APPLICATION: QUALIFIERS TESTING INSTRUCTIONS (TO BE USED DURING TESTING)

Submitting this document as the welder application is not acceptable. The welder application must be submitted to AWS via Shopfloor. This document is to be kept by the ATF.

1. TEST INFORMATION	
ATF Standard Test ID # (unique number)	
AWS B2.1 SWPS Name/Identification	
Alternative WPS Name/Identification (attach copy with CWI/WPQ2 acceptance)	
Governing Standard/Code	
Governing Standard/Code Edition (yyyy)	
Visual Acuity Examination(s) (as required by governing standard/code)	☐ Not Required ☐ Required and Acceptable
Date Coupon was Welded (mm/dd/yyyy)	
2. WELDER INFORMATION	
Name (First, Middle, Last)	
Mailing Address	
City	
State/Province/District	
Country	
Zip/Postal Code	
Phone Number:	
Email Address:	
3. TEST ADMINISTRATION INFORMATION	
Date Coupon was Welded (mm/dd/yyyy)	
This is a test administered:	☐ at an ATF ☐ remote/off-site location by an ATF Qualifier
ATF Information	ATF ID # _____ ATF Name _____

Qualifier's Information (performance testing)	Full Name _____ CWI # _____ Expiration Date (mm/dd/yyyy) _____

4. WELDER INDENTIFICATION VERIFICATION	
Photo Submitted (passport style photo)	☐ Yes
Identification Verification (must be a valid government-issued photo ID)	☐ Yes ☐
Identification Verification Used	☐ Driver's License ☐ Passport ☐ Other _____

5. WELDING TEST VARIABLES			
Welding Process and Type (check actual performed)	☐ FCAW ☐ GMAW ☐ GTAW ☐ SMAW ☐ SAW ☐ SW ☐ Other _____	☐ Manual ☐ Machine ☐ Automatic ☐ Semi-Automatic	
Joint Type	Groove	Fillet	Other
Test Coupon Positions (check all that apply)	☐ 1G ☐ 2G ☐ 3G UP ☐ 3G DN ☐ 4G ☐ 5G UP ☐ 5G DN ☐ 6G UP ☐ 6G DN ☐ 6GR	☐ 1F ☐ 2F ☐ 2FR ☐ 3F UP ☐ 3F DN ☐ 4F ☐ 5F	☐ _____
Material	☐ Plate: Thickness(es) _____ ☐ Pipe: Diameter _____ Thickness(es) _____ ☐ M/P Number _____ to _____ ☐ Material Type, Grade _____ to _____ ☐ With Backing (also applies to CJP welded from both sides) ☐ Without Backing (CJP welded from one side)		
Filler Metal Used	AWS Spec: _____ AWS Class: _____ F-No _____		

	Diameter _____ Deposit Thickness Process #1 _____ Deposit Thickness Process #2 _____ Consumable Insert Type _____
Torch Shielding Gas Type & Flow (if applicable)	AWS A5.32 = _____Flow Rate:_____
Root Shielding Gas Type & Flow (if applicable)	AWS A5.32 = _____Flow Rate:_____
Metal Transfer Mode (GMAW or FCAW)	☐ Spray ☐ Globular ☐ Pulse ☐ Short Circuit
Electrical Characteristics	Current _____ Polarity _____

6. PRETEST SEQUENCE – QUALIFIER RESPONSIBILITIES	
ACTION	**QUALIFIER INITIALS**
1. Verify Welder is using required PPE.	
2. Welding Equipment and tools function as designed.	
2.1 Verify Welding Equipment Calibration is in compliance with the ATF's Quality Manual (either per calibration program or actual measurement during welder practice session)	
2.2 Zero out machine	
3. Verify proper hand tools are available.	
4. Verify proper power tools are available and proper use (power brush allowed between passes; power grinder only for feathering tacks and weld tie-in's at starts and stops; no power tools on completed face of weld, it is presented in the as-welded condition only).	
5. Proper Coupon available, coupon adequately cleaned, and degree of bevel verified	
6. Base materials and consumables in accordance with ATF's material control requirements	
6.1 MTRs for test coupon (base materials)	
6.2 Certificates of Conformance/MTR (filler metals & shielding gas, as applicable)	
6.3 Base Materials and Consumables properly selected per the WPS	
7. Mark test coupon with unique identification	

8. Review WPS with Welder. Determine Additional potential hold points per WPS (e.g. check amps, volts, travel speed, back gouging, etc. and record if applicable)	
9. AWS CW Application and Maintenance of Certification (Renewal) Process is reviewed with the welder	

I have reviewed the WPS to be used for this performance qualification test and agree that it is appropriate for its intended purpose. I have received orientation on the conduct during this qualification test. I understand that this is the first step of welder certification and that the weldments I complete today must undergo further evaluation before certification can be determined.

I understand that this performance qualification test is not complete at the end of welding. Successful completion will depend upon meeting the requirements of the governing code requirements for subsequent NDE or destructive tests. I understand the test can be terminated at any point at the discretion of the Qualifier.

Signature of Welder: _____

7. WELD TEST HOLD POINTS	
ACTION POSITION OF TEST COUPON _____	**QUALIFIER INITIALS**
1. Allow the welder a practice session on scrap/sample material and verify the welder's chosen machine settings comply with the WPS. After practice is complete, verify and record actual welding parameters used for the root pass. VOLTS _____ AMPS _____	
2. Verify Unique Identification is present on the Test Coupon(s)	
3. Verify fit-up of the weld joint after tacking for compliance with the WPS allowance	
4. Have welder position the tacked coupon into the fixture	
5. Verify proper test position of the weld joint in the fixture before welding begins	
6. Have welder complete the root pass then clean (if needed) and hold for presentation for visual inspection	
7. Root pass visual inspection ☐ Pass ☐ Fail VOLTS _____ AMPS _____	
8. Resume welding with periodic observation of fill passes and cleaning methods by the welder and verify technique in accordance with WPS VOLTS _____ AMPS _____ OTHER _____	
9. If multiple welding processes are used, measure deposited weld metal thickness for process #1. Then verify and record actual welding parameters for process #2.	

Welding Process #1: THICKNESS OF DEPOSITED WELD METAL _____ Welding Process #2: THICKNESS OF DEPOSITED WELD METAL _____	
10. Complete the test weld following the WPS (coupon remains in fixture for visual inspection)	
11. Clean by brushing only (no grinding on cover passes) for presentation for final visual inspection	
12. Final visual inspection ☐ Pass ☐ Fail	
13. Coupon is maintained in as-welded condition for ATF evaluation	
14. Other hold points as applicable: _____	

I attest that I have conducted this welder performance qualification test in accordance with the requirements of the standards listed above. This signature does not constitute welder certification.

Signature of Qualifier: _____

DESTRUCTIVE TESTING CHECKLIST

1. ATF QUALIFIER	
ACTION (if any of these items are not adequate, stop immediately)	**QUALIFIER INITIALS**
1. Condition: Required markings are evident on the coupon (i.e. ID marks, processing marks)?	
2. Examine received coupon. Are they in the as-welded condition?	
3. Visual Inspection of Received Coupons acceptable?	
4. Verify the specimen preparation and received materials using the governing standard; verify the materials and quantity of materials are adequate to perform the required tests. Acceptable?	

2. SPECIMEN PREPARATION

Follow ATF procedures for specimen preparation that address the minimum activities required as per QC47.

3. MECHANICAL TESTING

Guided Bend Tests (as required by the governing standard) (state "not applicable" in the notes column for unused side bend types or other not used tests including radiography)

	Pass	Fail	Notes
Face 1			
Face 2			
Root 1			
Root 2			
Side 1			
Side 2			
Side 3			
Side 4			

4. OTHER TESTS (as required by the governing standard)

	Pass	Fail	Notes
Nick Break			
Other:			
Macro-etch			
Bend Break / Fracture Test			
Radiographic Testing (in lieu of bends, when permitted by the governing standard/code)*			
Laboratory Report**	☐ Yes ☐ No		Report # (if applicable): _____
Radiographer Name		☐ Level I ☐ Level II	☐ Level III

**Reader Sheet to be retained by ATF.*

***Laboratory Report to be retained by ATF.*

5. OVERALL TEST SUMMARY (REQUIRED)
☐ Pass ☐ Fail
Reason (if test failed):

I attest that I have conducted this welder performance qualification test in accordance with the appropriate requirements of the standards listed above to the best of my ability. This signature does not constitute welder certification.

I attest that the information provided in this form is complete and accurate to the best of my knowledge.

Signature of Qualifier _____