



Welding & Joining Management Group

FORENSIC EXPERTS • METALS TESTING

INFORMATION FOR WELDER QUALIFICATION TEST REPORTS

Please indicate the following information with the completed weld test coupons. **Be sure to write down the name of the welder and the last 4 digits of their social security number or employee number on the completed test plate.**

Company name:	
Address:	
Phone:	
Fax:	
Contact:	
Payment Method:	<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Check PO # _____ (prior WJMG approval required)
First and last name of welder:	
Last 4 digits of SSN or Employee No.:	
Existing WPS number:	
Filler Metal Classification (ex: E7018, E6010, etc.):	
Diameter of filler metal:	
Shielding gas and backing gas:	
Position test piece was welded in (ex. flat, horizontal, vertical or overhead):	
If the test was welded vertically, write whether it was welded vertical up or down:	
Amps:	
Volts:	
Arc Travel Speed (measured in inches per minute):	
Highest Inter-pass temperatures:	
Who witnessed the welding:	