



# 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<br>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:  |  |

FR 4000 – Welder Info Needed

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