

UA WELDER QUALIFICATION CONTINUITY REPORT

Welder's First Name	MI	Last Name

UA Card Number	UA Testing Local

WELDER CONTINUITY INFORMATION

Indicate the last date the process was used

SMAW	<table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td></tr> </table>			/			/			* Manual Welding
		/			/					
GTAW	<table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td></tr> </table>			/			/			* Manual Welding
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		/			/					
Automatic or Machine Welding (GTAW)	<table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td></tr> </table>			/			/			* This includes orbital welding
		/			/					
Torch Brazing	<table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;">/</td><td style="width: 15px; height: 15px;"></td><td style="width: 15px; height: 15px;"></td></tr> </table>			/			/			* Non Med-Gas
		/			/					

We certify that the statements made on this record are correct:

Manufacturer/Contractor Company Name

Signature of Company Representative

Date Signed

Printed Name & Title of Company Representative

UA Local Union Number

Signature of UA ATR

Date Signed

Printed Name of UA ATR

Mail To: The UA Testing Local shown above, ATTN: UA Authorized Testing Representative