



WELDCRAFT-PRO - DIVE SCHOOL APPLICATION FORM

Please accept our application to be considered to run the WeldCraft-Pro™ underwater welding course.

Company/Organisation:

Full postal address:
.....

Direct phone #: General office #:

Email: URL:

No of years founded: No of teaching staff (welding):

Person(s), including title, responsible for management of the courses:
.....

Person(s), including title, responsible for administration/control of teaching materials:
.....

Name of senior welding instructor(s):

Is instructor(s) employed directly by school: YES/NO. If No, please provide more details:
.....

Professional qualifications held:

If no formal qualifications held, provide a detailed CV:

Do you have a qualified (in-house) welding inspector: YES/NO. If YES, please provide a copy of their CV.

Pls give details of a locally approved weld testing laboratory:
..... Max # of students' p/course:

What welding standard do you use: # of courses to be run each year:

Do you teach in dive tanks or open water: Are you ISO 9000 certified: YES/NO

Which national or international diving regulations apply:

Is the English language (written & spoken) by students and staff: YES/NO

Please use the rest of this form (or other documents) to provide a detailed description of the facilities available at your school, e.g. number of welding bays, equipment, staff, general facilities/structure of buildings, etc. so we can obtain a better understanding of your organisation. Please feel free to send us photos of your facilities, equipment, buildings, etc.

All information supplied will be held in the strictest of confidence



Name:..... Signature: Date:.....