



APPLICATION FORM NON DESTRUCTIVE TESTING CERTIFICATION

PROTECTED (when complete)

****These documents must be completed in their entirety to be processed by Natural Resources Canada (NRCAN) National Non-Destructive Testing Certification Body (NDTCB)**.**
Incomplete documentation may lead to longer processing times. This application form is for candidates applying for **Non-Destructive Testing (NDT)** examination according to the CAN/CGSB-48.9712-2014 Standard. Before completing this application please refer to the NDT application checklist on pages 5 and 6 for instructions.

Mr ☐ Mrs ☐ Ms ☐ Preferred Language English ☐ Français ☐
Reg # (if applicable) _____
Name _____ / _____
Surname (Last Name) Given Names
Former Surname (Last Name) if applicable _____
Address of Residence _____
City _____ Province _____ Postal Code _____
Mailing Address (if different than above) _____
City _____ Province _____ Postal Code _____
Tel (Home) _____ Tel (Alternate phone or Cell) _____
Email _____
Date of Birth: YYYY MM DD

Present Employer _____
Contact Name _____ Title _____
Address _____
City _____ Province _____ Postal Code _____
Tel. _____ Email _____

I am applying for examination as follows:

☐ With Full Qualifying Experience

☐ Without Full Qualifying Experience

☐ Initial attempt

☐ Re-Examination (Please submit page 1 only)

Level	Industrial Radiography	Industrial Radiography	Ultrasonics	Magnetic Particle	Liquid Penetrant	Eddy Current	Visual Testing
#	EMC Sector	Aerospace	EMC Sector	EMC Sector	EMC Sector	EMC Sector	EMC Sector
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	<input type="checkbox"/>	N/A
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please Note: One or more of the check-boxes (above) must be checked.

Payable to "Receiver General for Canada"

Please note the application fee and exam fees required per method and level

Please refer to fee chart for more information. Fees are non-refundable and non-transferable.

Type of Payment:

Personal Cheque ☐

Company Credit Card ☐

Mastercard ☐

Amex ☐

Company Cheque ☐

Personal Credit Card ☐

Visa ☐

Money Order ☐

Cardholder Name _____ Amount _____

Card No. _____ Expiry Date _____

MM/YY

Cardholder Signature _____

Please Note: Payment of fees does not complete or guarantee the application process. Admittance forms are issued only after completion, verification, and NRCAN NDTCB approval of application. It is the applicant's responsibility to provide the NRCAN NDTCB with payment information for each application submitted. To protect payment information, we ask that all forms containing credit card information (Mastercard, Visa, AMEX) be submitted via Fax or Mail only. Do not send credit card information by e-mail. If you have any questions, please call 1-866-858-0473.

OFFICE USE ONLY

Name

Method(s)

Registration Number

Application

Rec'd _____ / _____ / _____
YYYY/MM/DD

Ackn'd _____ / _____ / _____
YYYY/MM/DD

Approved _____ / _____ / _____
YYYY/MM/DD

Amt	Type	Date
\$		____/____/____ YYYY/MM/DD
\$		____/____/____ YYYY/MM/DD
\$		____/____/____ YYYY/MM/DD
\$		____/____/____ YYYY/MM/DD
\$		____/____/____ YYYY/MM/DD

	Att'd	Filed
Photo	<input type="checkbox"/>	<input type="checkbox"/>
Vision	<input type="checkbox"/>	<input type="checkbox"/>
Ethics	<input type="checkbox"/>	<input type="checkbox"/>
Training	<input type="checkbox"/>	<input type="checkbox"/>
Prerequisite	<input type="checkbox"/>	<input type="checkbox"/>

Note: Admittance Forms will NOT be sent to examination facilities by the NRCAN NDTCB

I wish to obtain my admittance form(s) and correspondence by one of the following methods: (check ONE only)

Mail ☐

Email ☐

Fax ☐ _____

Other Information

Payment: Government of Canada Acquisition Cards are not accepted by the NRCan National Non-Destructive Testing Certification Body. Payment from Other Government Departments should be made by inter-departmental FIS transactions.

Fees: Fees and other process requirements are subject to change; please refer to our website ndt.nrcan.gc.ca for the most current information.

Privacy Policy: The NRCan NDTCB is committed to protecting your privacy whether you are an existing client or a new applicant. All personal information created, held, or collected by the Government of Canada is protected under the federal Privacy Act. Our office will ensure that collected personal information and any communications between the NDTCB and their clients or applicants are considered confidential, protected, and are for the exclusive use of the intended recipient to fulfill certification program requirements. Personal information is collected as stated in NRCan's Info Source (PAA 3.1.2 – Materials and Certification for Safety and Security - Bank Number: NRCan PPU 015), and the certified personnel's name, city and province of residence and certification status are made publicly available in support of section 9.3 of the CAN/CGSB-48.9712-2014 national standard as a mechanism of effective certification status verification.

Responsibilities: Certified personnel and applicants must respond to NRCan NDTCB communication in a timely manner, and inform the NRCan NDTCB of any changes to address and contact information. Clients are responsible for the official documentation issued to them by the NRCan NDTCB. Fees may apply for the replacement of these documents.

Admittance Form Requirements: All applications will require the following requisites (as a minimum) - to receive Written Exam Admittance forms:

- Application form signed and current dated by the applicant;
- Application and examination fees processed;
- NRCan NDTCB Code of Conduct form signed and current dated by the applicant;

For new/initial applicants to NRCan/CGSB – must include passport photographs with a signed Photograph Verification Form, a verified true copy of one (1) valid piece of Canadian Government recognized identity document on a signed Identification Verification Form, and must have their Application form signed by their supervisor. If you are currently unemployed, please contact the NRCan NDTCB for further instruction.

Practical Examination Admittance and Registration forms will only be issued if the above requirements are satisfied in addition to:

- A minimum of 25% of the method-specific QWE required
- The reported QWE being reviewed and approved by the NDTCB

The remaining seventy-five percent (75%) of NDT experience may be acquired either before or after success in the qualification examination. Certification is possible only if candidates provide evidence of having gained the qualifying work experience, and the other qualifying requisites (as noted) within 2 years of successfully completing the examinations, otherwise, their examination results would be void.

Education

Secondary School _____ Final Grade Completed _____
 Address _____
 Province _____

College/University	Degree or Certificate	Length- Years	Date of Completion

Training

NDT training courses only. Please submit a copy of each training certificate

Recognized Training Organization	Method	Theory Hours	Practical Hours	Date of Completion

I have included the following training certificates:

<input type="checkbox"/> MT	<input type="checkbox"/> PT	<input type="checkbox"/> RT	<input type="checkbox"/> ET	<input type="checkbox"/> UT	<input type="checkbox"/> VT	<input type="checkbox"/> M&P	<input type="checkbox"/> RT Safety
-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	------------------------------	------------------------------------

Applicant's Name _____

Date _____

YYYY-MM-DD

Qualifying Work Experience

To gain a **credit** for work experience, one must work under "qualified supervision". Name(s) of supervisor(s) must be identified in reference section on next page. The applicant must **fully complete** the following section to indicate the *Industry, Applications, Materials, Percentage of Time, and Details* pertaining to the non destructive testing method in which certification is requested. Work experience is based on a nominal 40 h/wk (175 h/mth) or the legal week of work. When an individual works in excess of 40h/wk he may be credited with experience based on the total hours, but s/he should be able to produce evidence of this experience.

Please use additional sheet if space below for description is insufficient

Levels 1 & 2

To complete summary of NDT experience in space below

Level 3 only

- a) To complete summary of NDT experience in space below
b) To submit an extensive and detailed resume of NDT experience on separate sheets

Position 1

Company _____ Period Of Employment: From _____ To _____ Location _____
YYYY-MM-DD YYYY-MM-DD

Position held _____

Acquired NDT Experience : MT hours _____ PT hours _____ ET hours _____ UT hours _____ RT hours _____ VT hours _____

Note: At least one (or more) of the fields for "Hours of NDT Experience" must be filled.

Position 2

Company 2 _____ Period Of Employment: From _____ To _____ Location _____
YYYY-MM-DD YYYY-MM-DD

Position held _____

Acquired NDT Experience : MT hours _____ PT hours _____ ET hours _____ UT hours _____ RT hours _____ VT hours _____

Please note: you must have acquired 25% of your experience hours in order to be issued your practical examination admittance form.

General Work History in NDT

Industry	Applications	Materials	Percentage of Time	Approximate Percentage Time Spent
<input type="checkbox"/> Aviation/aerospace <input type="checkbox"/> Nuclear <input type="checkbox"/> Petro-Chemical <input type="checkbox"/> Manufacturing <input type="checkbox"/> Mining <input type="checkbox"/> Pulp and paper <input type="checkbox"/> Ship Yard <input type="checkbox"/> Structural <input type="checkbox"/> Training/Certification <input type="checkbox"/> Research Other: _____	<input type="checkbox"/> Welds <input type="checkbox"/> Forgings <input type="checkbox"/> Castings <input type="checkbox"/> Pipe/Tubes <input type="checkbox"/> Fittings/valves <input type="checkbox"/> Pressure vessels <input type="checkbox"/> Nozzles/nodes <input type="checkbox"/> Storage tanks <input type="checkbox"/> Lift Equipment <input type="checkbox"/> Structures Other: _____	<input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Copper <input type="checkbox"/> Aluminum <input type="checkbox"/> Magnesium <input type="checkbox"/> Concrete <input type="checkbox"/> Ceramic <input type="checkbox"/> Plastic <input type="checkbox"/> Composites Other: _____	_____ % MT _____ % PT _____ % RT _____ % UT _____ % ET _____ % VT Combined Total = 100%	_____ % doing inspections _____ % planning/reporting _____ % supervision of staff/meetings _____ % training (take/give) conferences _____ % writing procedures /documents _____ % other _____

Details (approximate) of Work History in Each NDT method

MT	PT	RT	UT	ET	VT
<input type="checkbox"/> Yoke <input type="checkbox"/> Coil wrap <input type="checkbox"/> Prods <input type="checkbox"/> Wet bench <input type="checkbox"/> Dry Powder <input type="checkbox"/> Aerosol <input type="checkbox"/> Visible <input type="checkbox"/> Fluorescent Other: _____	<input type="checkbox"/> Aerosol <input type="checkbox"/> Brush <input type="checkbox"/> Dip Tanks <input type="checkbox"/> Solvent removable <input type="checkbox"/> Water wash <input type="checkbox"/> Post emulsifier <input type="checkbox"/> Visible <input type="checkbox"/> Fluorescent Other: _____	<input type="checkbox"/> Isotope <input type="checkbox"/> X-Ray <input type="checkbox"/> Linear accelerator <input type="checkbox"/> Film <input type="checkbox"/> Fluoroscopy <input type="checkbox"/> Digital <input type="checkbox"/> Auto develop <input type="checkbox"/> Manual dev Other: _____	<input type="checkbox"/> Thickness gauge <input type="checkbox"/> Flaw detector <input type="checkbox"/> Phased array <input type="checkbox"/> Straight beam <input type="checkbox"/> Angle beam <input type="checkbox"/> Contact <input type="checkbox"/> Immersion Other: _____	<input type="checkbox"/> Analog meter <input type="checkbox"/> Phase display <input type="checkbox"/> Single freq <input type="checkbox"/> Multi-freq <input type="checkbox"/> Remote field <input type="checkbox"/> Absolute mode <input type="checkbox"/> Differential mode <input type="checkbox"/> Spinning mode Other: _____	
<input type="checkbox"/> Reports <input type="checkbox"/> Instruction <input type="checkbox"/> Procedures <input type="checkbox"/> Standards Other: _____	<input type="checkbox"/> Reports <input type="checkbox"/> Instruction <input type="checkbox"/> Procedures <input type="checkbox"/> Standards Other: _____	<input type="checkbox"/> Reports <input type="checkbox"/> Instruction <input type="checkbox"/> Procedures <input type="checkbox"/> Standards Other: _____	<input type="checkbox"/> Reports <input type="checkbox"/> Instruction <input type="checkbox"/> Procedures <input type="checkbox"/> Standards Other: _____	<input type="checkbox"/> Reports <input type="checkbox"/> Instruction <input type="checkbox"/> Procedures <input type="checkbox"/> Standards Other: _____	

Supervisor's Signature (Same as Section B on page 4) _____ Date _____

YYYY-MM-DD

Applicant's Name _____

Date _____

YYYY-MM-DD

ATTESTATIONS

Please Note: All attestation sections must be completed. Applicants cannot sign for themselves. For the required signatures, the same person(s), appropriately qualified for each of these definitions, may sign for one or more of these roles.

A) Employer: A member of the management staff of the organization that the applicant works for on a regular basis. I attest to the best of my knowledge that the information given on this form is accurate and/or the photographs attached are those of the applicant who signed this application form. The NRCAN NDTCB may contact me to verify information related to this application.

Employer's full given name (Please Print) _____ Date ____/____/____
YYYY MM DD

Employer's signature _____ Employer's job title _____

Current employer _____ Address _____

Telephone _____ Email _____

B) Supervisor: An appropriately qualified individual who is accountable for directing the technical work and safety of the applicant. The supervisor will normally be located at the facility or field site of the test or inspection activity and is responsible for supervising the technician(s) and other procedural aspects of the job. Qualified supervisors would include personnel certified at the appropriate level under CAN/CGSB-48.9712 or non-certificated personnel who, in the opinion of the NRCAN NDTCB, possess the knowledge, skill, training and experience required to properly provide such supervision. In some cases, it is possible that a supervisor may not be employed by the same employer as the applicant. In that case, please provide a document explaining the supervisory relationship. I attest to the best of my knowledge that the information given on this form is accurate and/or the photographs attached are those of the applicant who signed this application form. The NRCAN NDTCB may contact me to verify information related to this application.

Supervisor's name (Please Print) _____ Date ____/____/____
YYYY MM DD

Supervisor's signature _____ Supervisor's job title _____

Current employer _____ Address _____

Telephone _____ Email _____

C) Sponsor: Active NRCAN/CGSB-certified Level 2 or Level 3 personnel that can attest to and substantiate the validity of the candidate's application. I attest to the best of my knowledge that the information given on this form is accurate and/or the photographs attached are those of the applicant who signed this application form. The NRCAN NDTCB may contact me to verify information related to this application.

Sponsor's name (Please Print) _____ Date ____/____/____
YYYY MM DD

Sponsor's signature _____ Sponsor's job title _____

Current employer _____ Sponsor's telephone number _____

Applicant: I attest that the statements made by myself in this application are true and complete. I understand that if any of these statements are found to be untrue, this application may be rejected, and/or the resultant certification be withdrawn. I understand that the NRCAN NDTCB may conduct audits and investigations to verify the validity of the information in this application, and that I will fully cooperate in providing any additional documentation and explanation as requested. I am fully aware that the NRCAN NDTCB may actively communicate with the individuals referenced in this application, and/or other related individuals, to ensure the validity of the declarations on this application. I attest that I have reached the age of majority in my province and that I have not applied to the NRCAN NDTCB previously using a different name or alias unless otherwise stated. The NRCAN NDTCB may contact me to verify information related to this application. My signature is an attestation that I clearly understand and will comply with the terms and conditions of NRCAN NDTCB's program for certification.

Your signature MUST NOT exceed the inner limits of the signature box.

Date : ____/____/____ Name: _____
YYYY MM DD

Please Note: The NRCAN NDTCB makes all reasonable efforts to ensure candidate applications, examination requests and certification submissions are completed as per service standard targets. Despite these efforts, the occurrence of errors, omissions and delays cannot be completely ruled out and the NRCAN NDTCB is not responsible for any direct and indirect costs, expenses or delays which may arise.

RELEASE OF INFORMATION

This is to authorize the NDTCB, if requested, to release my examination results and/or admittance forms to my employer and/or the payee of my examination fees.

Applicant's signature _____ Date: ____/____/____
YYYY MM DD

This is to authorize the NDTCB to allow _____ to act on my behalf to provide application information and receive applicable updates/
correspondence. Contact's Full Name

Applicant's signature _____ Contact's telephone number _____ Contact Email _____

NDT APPLICATION CHECKLIST

Please include following checklist (pages 5-6) when submitting application

All applications will require the following four (4) requisites as a minimum prior to examination or certification. Examination Admittance and Registration Forms will only be issued with the completion and acceptance by the NRCAN NDTCB of all of the following:		Enclosed	
		Yes	No
1.	APPLICATION FORM The application form must be fully completed, signed and current dated by the applicant who has reached the age of majority in their province.	<input type="checkbox"/>	<input type="checkbox"/>
2.	FEES <ul style="list-style-type: none"> • Application, Written & Practical fees are required for each method and are payable to the Receiver General for Canada. Payments may be made via Fax or Mail only. Please do not submit credit card information by email. • Application Fee: This fee is submitted to the NRCAN National Non-Destructive Testing Certification Body for assessment of examination eligibility. Please note that assessment of application forms will not be performed unless this fee accompanies the application. This fee is non-refundable and non-transferable and applies only to the initial application form for a given method and level, regardless of the number of repeat examinations. • Written and Practical Examination Fees: These fees can be remitted at the same time as the candidate application fee, or separately. The NRCAN National Non-Destructive Testing Certification Body must receive these fees before it can issue the written or practical examination admittance and registration forms, which allow the NDT candidate to participate in the examination(s). 	<input type="checkbox"/>	<input type="checkbox"/>
3.	NRCAN NDTCB CODE OF CONDUCT Individuals who are certified or individuals who are in the process of being certified by the NRCAN NDTCB must recognize that personal integrity and professional competence are the fundamental principles on which their activities are founded. Accordingly, it is a condition of NRCAN certification that these individuals shall sign and submit the 8.2.1-002 - NRCAN NDTCB Code of Conduct form.	<input type="checkbox"/>	<input type="checkbox"/>
4.	TWO (2) PASSPORT PHOTOGRAPHS & VERIFIED TRUE COPY OF ONE (1) VALID PIECE OF CANADIAN GOVERNMENT RECOGNIZED ID Applicants registering with the NDTCB FOR THE FIRST TIME must provide two (2) passport photographs with a signed 8.2.1-011 - Photograph Verification Form and must include a verified true copy of one (1) valid piece of Canadian Government recognized identity document on a signed 8.2.1-026 - Identification Verification Form. This identity document must have the applicants' full legal name (name must appear on the application form as it appears on the identification document), date of birth, photo & signature and may be verified as a true copy by the listed employer (same as Section A on page 4) or by a professional individual as listed on the Identification Verification Form. An example of valid and acceptable proof of ID: passport, driver's license, Military identification, Certificate of Indian Status, Provincial or territorial health care card that includes your photo and signature (excluding Alberta, Manitoba and Newfoundland and Labrador). Documents that are in a language other than English or French must be translated by a certified translator. The photographs must: <ul style="list-style-type: none"> • be taken by a commercial photographer, clear/focused, in color, taken straight on with the face and shoulders centered and squared to the camera and measure 5cm wide and 7cm high; • reflect the candidate's current appearance (taken within the last twelve (12) months); • be professionally printed on photographic paper (photos printed at home, self-taken or non-passport type photos are not acceptable); • show your complete name, as well as the name and complete address of the photo studio and the date the photo was taken on the back of one photo. 	<input type="checkbox"/>	<input type="checkbox"/>
Documents for the following four (4) requisites may be submitted at a later date, however, must be successfully completed prior to attempting the NDT exam		Enclosed	
		Yes	No
1.	TRAINING All candidates must provide documentary evidence of satisfactory completion of a NDT course of training from a Recognized Training Organization (RTO). Please submit a copy of each certificate.	<input type="checkbox"/>	<input type="checkbox"/>
2.	PREREQUISITES The candidate shall provide evidence acceptable to the certification body that he/she has successfully passed the required prerequisites administered by an NDTCB Recognized Training Organization (RTO). Please refer to the NRCAN NDTCB website for the most up to date prerequisites.	<input type="checkbox"/>	<input type="checkbox"/>
3.	VISION TEST REPORT FORM FOR NON-DESTRUCTIVE TESTING PERSONNEL Each NDT candidate must undergo a visual acuity test with an ophthalmologist, optometrist or other medically recognized personnel attesting that the candidate has completed a satisfactory vision test as outlined by the 8.2.1-003 - Vision Test Report Form for Non-Destructive Testing Personnel.	<input type="checkbox"/>	<input type="checkbox"/>
4.	QUALIFYING WORK EXPERIENCE <ul style="list-style-type: none"> • The candidate must provide a complete and thorough description of his/her work experience specific to the NDT method(s) applied for and clearly identify the period of employment for each employer/company and the acquired NDT experience in hours or months (based on 175 hours/month) by NDT method(s). • Each submission of qualifying experience requires signature and date by the candidate, supervisor and sponsor. • The supervisor's or sponsor's name, registration number, type of certification (level 2 certification of the applicable method or level 3 certification is required), position/ title and organization must be identified; if certificated under a foreign/non-CGSB scheme, documented proof of certification is required. The application and supporting documentation dealing with NDT experience must be signed and dated by both the applicant and the immediate supervisor. • Certification is possible only after providing evidence of having gained the qualifying work experience, and the other qualifying requisites (as noted) within two (2) years of successfully completing the examinations, otherwise, your examination results would become expired. • Please note: Candidates must have acquired 25% of the required experience hours in order to be issued a Practical Examination Admittance and Registration Form. 	<input type="checkbox"/>	<input type="checkbox"/>

Applicant's Name _____

Date _____

YYYY-MM-DD

AS PER CAN/CGSB-48.9712-2014 Standard para 5.6

Candidates shall:

- a) provide documentary evidence of satisfactory completion of a course of training;
- b) provide verifiable documentary evidence that the required experience has been gained under qualified supervision;
- c) provide documentary evidence of vision satisfying the requirements of para 7.4;
- d) abide by a code of ethics published by the certification body.

LEVEL 3 CANDIDATES

- **As Per CAN/CGSB-48.9712-2014 Standard para 7.2.2** -Taking into account the scientific and technical potential of candidates for Level 3 certification, preparation for qualification may be done in different ways: by attending training courses, conferences or seminars, studying books, periodicals, and other specialized printed or electronic materials. Regardless of the manner of preparation, the Level 3 candidate shall submit detailed documentary evidence of appropriate training in a form acceptable to the certification body, including specific hours, specific references and how the materials relate to the Level 3 method specific per application.
- It is recommended that candidates attend Level 3 courses from an Recognized Training Organization (RTO) – these courses normally consist of modules devoted to all methods as well as Level 3 method specific material. Candidates taking Level 3 courses from an RTO can submit their course certificate from other method level 3 courses however they must include and detail the additional training they have completed for their specific method in which they are applying for.

EXAM AND SPECIAL WRITTEN EXAMINATION CENTER REQUESTS

- Please ensure your application has been processed by the NRCAN NDTCB and you have received your admittance and form before booking your examination.
- Please allow three (3) working weeks for the NDTCB to properly process examinations after they have been received by our office.
- Examination results are not released until three (3) working weeks from the date the examination has been received.
- The NRCAN NDTCB requires two (2) working weeks' notice to process a Special Written Examination Centre (SWEC) request.
- Candidates may submit declaration to the NDTCB in advance to request accommodation in the event of special needs prior to their examinations. Additional documents may be required and may lead to a longer processing times.

RE-EXAMINATION

- Re-examination: A candidate, who fails to obtain the pass grade for any examination part, may be re-examined twice in the failed part(s), provided that the re-examination takes place not sooner than **one month** after the previous examination. (As per CAN/CGSB-48.9712-2014 Standard para 8.5.2)
- To apply for a re-examination, please fill out page 1 of the application form, check "Re-Examination" and provide the appropriate fee. Please submit your request by mail to the address below, fax 905-645-0836 or the general mailbox at NDT@NRCan.gc.ca. **(Please do not submit credit card information by email.)**
- *Please Note: Re-examination applications are placed in queue by date received and processed on an as-received basis.*

PROCESSING TIMES

- As applications are processed in arrival sequence, processing times may vary depending on the volume of applications received and are not guaranteed. Incomplete documentation or complexity of routine verifications and checks may also lead to longer processing times.
- Please allow two (2) working weeks for the NDTCB to properly process an application form after it has been received by our office.
- The NRCAN NDTCB makes all reasonable efforts to ensure candidate applications, examination requests and certification submissions are completed as per service standard targets. Despite these efforts, the occurrence of errors, omissions and delays cannot be completely ruled out and the NRCAN NDTCB is not responsible for any direct and indirect costs, expenses or delays which may arise.

PLEASE NOTE:

- Payment of fees does not complete or guarantee the application and examination process.
- Admittance forms are issued only after completion, verification and NRCAN NDTCB approval of the application; certification status will not be granted until full completion, verification, and NRCAN NDTCB approval of application and required fees and requisites.
- The candidate is responsible to ensure all requisites/requirements have been met prior to examination or final certification. Submission of training, prerequisites, or visual acuity that have taken place following certification examination will be considered as non-compliant and may result in exam results not being accepted.
- Applications are subject to current NRCAN NDTCB policies and procedures.
- Any misrepresentation or falsification on any of the required documents may result in an NRCAN NDTCB Code of Conduct violation.

SURNAME AND GIVEN NAME(s) to appear on certification ID card:

- For a change of name you must provide a status update to the NDTCB by supplying a new signature as well as any supporting documents (i.e. copy of government issued ID) that can be used to support your request.

SIGNATURE

- You must sign your usual signature on page 4, as it will appear on your photo ID card.
- Your signature must not exceed the inner limits of the signature box.


CERTIFIED PERSONNEL

- For an updated list of certified personnel by the NRCAN NDTCB, please refer to our website.
- Please note that this list is regularly updated, however, there may be a period when a person is certified before an updated list is made available to the website.

Applying by Mail / Courier	Applying by Email (Please do not submit credit card information by email)
NRCAN National NDT Certification Body CanmetMATERIALS Natural Resources Canada 183 Longwood Road South, Office 120 Hamilton, Ontario, Canada, L8P 0A5	Email: NDT@NRCan.gc.ca
	How to Contact Us
	Phone Number: 1-866-858-0473 or 905-645-0653
Applying by Fax	NDT Website
By Fax: 905-645-0836	Website: http://ndt.nrcan.gc.ca
I have read the requirements stated in this checklist and am submitting my application accordingly	
<input type="checkbox"/> Yes	

Applicant's Name _____

Date _____

YYYY-MM-DD