ACCP Level II Recertification By Examination Application

This application is for ACCP Level IIs that must recertify by abbreviated Practical examination at the 10-year interval.

Бу	annieviai	eu Fractical exa	inination at the 10-year inte	ı vaı.		
		tification Nu ASNT identification (mber (certificate) number in the box to the	e right.)		
Pers	sonal D	ata Mail certification	on information to: Home Work	ζ		
Name			Circt	Middle laif		
Home	Family Name		First	Middle Init.		
	Address					
	City		State/Prov.	ZIP/Postal Code	Country	
	Dhone		Fav	Fmail		
Work	Phone		Fax	Email		
	Organization Nam	e				
	Address					
	0.4		Olah (Davi	7ID/Dardal Oada	Occupation	
	City		State/Prov.	ZIP/Postal Code	Country	
	Phone		Fax	Email		
Eas.	.					
		re listed in US dollars				
Save o	on certificati	ion fees now by bed	coming an ASNT member. See pa	ge 7 for all the benefi	ts members enjoy	у.
Exam	nination Tota	I	Enter total exam fees f	rom page 2		
Interr	national Maili	ng Surcharge	Required for all non-US	\$40		
Mem	bership Option	on	Take advantage of member pricin	ng NOW by completing the ages 7 and 8 and include t		
			- All tanks of h	<u> </u>	Total	
Pav	ment Pa	yment must be submi	itted with the application.			
		☐ Discover				
	ney Order	□ Visa	Credit Card Holder's Name: (please print)			
	-	☐ MasterCard	Credit Card Billing Address:			
	. ,	American Expre	ss Billing Address 2:			
	nust be drawn		Card Number:			
on a US	bank)					

Expiration Date: CIN Number*:

Date:

Card Holder's Signature:

^{*}Credit Card Identification Number (CIN): Visa/MasterCard/Discover: The three-digit number is printed on the signature panel on the back of the card following the account number. American Express: The four-digit number is printed above the account number on the front of the card.

10-year Recertification Requirements for ACCP Level II Personnel

10 years after initial certification or recertification by examination, ACCP Level II certificate holders must renew by completing the following requirements:

- 1) Complete and submit this application with fees;
- 2) Submit current (within 12 months) evidence of satisfactory near visual acuity (Jaeger J1 or equivalent) and color perception. If a color deficiency exists, applicants must send documented proof that they can discern indications in the applicable test methods. The method of documentation should be described in the employer's written practice; and
- Pass an abbreviated practical renewal examination. The renewal examination will consist of a hands-on practical examination of at least two (2) ASNT test pieces, with a minimum of one (1) test piece in each applicable test technique.

ACCP™ Level II Recertification Examination Fees

The table below lists the ASNT Member and Non-Member examination fees for ACCP Level II recertification by examination. To determine the fees that should be placed on the "Examination Total" line under "Fees" on page 1, do the following:

- 1) Check the boxes below to show which Techniques in you wish to recertify:
- 2) Check the boxes under Single or Multiple Techniques in each Method which you will test;
- 3) Place the proper fee in the far right column for each test method;
- 4) Total the right column fees and place that amount in the block at the bottom and in Block 1 on page 1.

Industrial Sector(s) applying for: General Industry (GI) Pressure Equipment (PE)								
		ASNT I	Members	Non-M	lembers*			
		Single Technique	Multiple Techniques	Single Technique	Multiple Techniques			
Methods	Techniques	\$200.00	\$275.00	\$275.00	\$350.00	Fees		
MT	☐ Yoke ☐ Bench							
PT	☐ Solvent Removable ☐ Water Wash ☐ Post-Emulsifiable							
RT	☐ Gamma ☐ X-Ray							
TU	☐ Welds ☐ Castings/Forgings							
VT	☐ Direct ☐ Remote							
**Total Examination fees:								

After your application is approved, you will receive an Approval letter from ASNT. You will then contact the ASNT Authorized Examination Center (AEC) of your choice to schedule the date and time for your examination.

Authorized Examination Centers may charge additional fees, contact the AEC to see what those fees will be.

All examinations are conducted in the English language.

You must allow at least 10 working days prior to any exam for scheduling at an AEC.

*** The fees for retaking failed examinations are the same as for the original attempt. ***

^{*} To take advantage of member pricing now, complete the membership application attached to the back of this application and include the membership payment on the "Membership Option" line under Fees on page 1.

^{**} Place the Total Fees on page 1, Fees, in block # 1.

Experience

Photocopy this page as necessary to list your NDT work experience since your initial certification or last renewal. If submitting experience from more than one employer, submit experience in reverse chronological order (most recent first), beginning with Position 1. Acceptable documentation of recent experience can include employer certification records, human resources records, a signed statement from the employer or responsible Level III, a signed statement from an ASNT Level III or ACCP Professional Level III, or, for self-employed personnel, signed statements from at least two (2) customers. The signature form below may be used for signed statements. All documentation must be in English or accompanied by an English translation

For GI Sector personnel wishing to upgrade to the Pressure Equipment Sector, an ASNT NDT Level III, ACCP Professional Level III, or an Authorized Inspector* must attest to the experience by signature below.

Name					
Las	(First		Middle Initial	ASNT ID#
Position #	Dates c	of Employment:			
			art Date	End Date	Total Time (Months)
organization Name					
Argonization Address					
Organization Address					
Dity	State/Prov.	ZIF	P/Postal Code		Country
Phone	Fax	Er	mail		
neck techniques below where NDT j	ob functions were performed by the ca	indidate named abov	ve and mu	cate the number	of firs. claimed for each.
MT: Yoke/Hrs E	Bench/Hrs				
	Hrs Water Wash/H	łre □ F	Post-Emi	ılsifiable/Hrs.	
RT: X-Ray/Hrs		II3	USI-LIIIC	iisiiiabie/i iis.	
	<u> </u>				
	s Welds/Hrs				
/T: Direct/Hrs	Remote/Hrs				
	Γ tasks the candidate named a that are attached to this applic				
Statement Option					
	e's employer, or a designated a the candidate, I confirm that th				
Employer/Agent/Custom	er Signature		Date		
Employer/Agent/Custom	er Name (print)		ASNT ID (if a	pplicable)	
Title					

Vision Requirements

Vision examinations shall be administered by a physician, licensed nurse, ophthalmologist or optometrist, or by personnel approved by the employer's Level III. The visual examination date must be within **12 months** of the date that this application is signed. The form below may be used to document this requirement.

Near distance vision

You must have visual acuity in at least one eye capable of reading the <u>Jaeger J1</u> test chart, or equivalent, at a distance of not less than 30.5 cm (12 in.)

Color vision

You must be able to differentiate between the colors used in the NDT method(s) for which certification is required.

Attestation of Visual Acuity	
Eye Exam Date	
Candidate Name (please print)	
	on on the candidate named above, and that the candidate has ne eye capable of reading the Jaeger Number 1 test chart or
I attest that I administered a color perception examinati	on on the candidate named above, and that the candidate has:
☐ No Color Perception Deficiency ☐ Color Percept	tion Deficiency (Specify)
Signature of Eye Examiner	Date
☐ Ophthalmologist/Optometrist ☐ Physician	☐ Registered Nurse
☐ Employer's Level III Certificate No:	Expiration Date:
Other (Approved by the Employer's Level III): Title	e:
Employer Attestation (for Candidate Color Pe	erception Deficiency)
	ne candidate's ability to distinguish colors used in the applicable ed by the employer or a designated and responsible agent of the Level III, or company Level III per SNT-TC-1A).
I attest that the above named candidate has sufficien applicable test method(s) as specified in employer proced	ntly demonstrated the ability to distinguish colors used in the lures.
Employer/Agent Signature	Date
Employer/Agent Name (print)	ASNT ID (if applicable)
Empoyon gont reant (pint)	TOTAL ID (II application)
Titlo	

Reaffirmation of the Code of Ethics

By signature on this application, if certified by ASNT, I agree to abide by the ASNT Code of Ethics for ASNT Level II Personnel so long as I maintain a Certificate. Further, I understand the right of ASNT to suspend or revoke any Certificate granted if I abuse the privileges therein granted to me.

I understand that certifications which may result from this application do not constitute any form of license.

I hereby attest that all facts on this application are true and correct and no information which might be detrimental has been withheld. ASNT may make any inquiries necessary to determine my qualifications for certification. I agree to abide by the decision of ASNT relative to the granting of any Certifications as applied for herein.

For valuable consideration, the undersigned, having made application for Certification as Level II before ASNT, does hereby release and forever discharge The American Society For Nondestructive Testing, an Ohio Corporation, from any and all liabilities, claims, demands, or causes of action whatsoever, which now exist or which may hereafter arise on account of the undersigned's activities henceforth as Level III certified by ASNT.

The undersigned further acknowledges that this release is being given as a prerequisite for having filed application for consideration by ASNT.

The undersigned further represents that if not certified by ASNT, then this release and discharge shall have no force and effect; otherwise, upon certification as set forth above, this release shall be binding on the undersigned and The American Society for Nondestructive Testing, Inc. and any and all agents of ASNT in connection with such certification process. I have read and understand the attached transfer, cancellation and refund policy and understand that all application documents submitted to ASNT become the property of ASNT.

I authorize ASNT to publish my name, city, state, country, test methods, Levels and expiration dates of certification.

Print Name of Applicant		
Signature of Applicant		
Date		

Photos and Signature

Attach 2 passport-type photos (2 x 2 inches) over the box indicated below OR

	Check here if	you wish to	use the picture	submitted with	your original	application.
--	---------------	-------------	-----------------	----------------	---------------	--------------

Attach two (2) passport photos here In the signature box below, sign your name as you would like it to appear on your wallet card. Keep your entire signature entirely within the box.

Signature Box	

Transfer / Cancellation / Refund Policy

All ASNT examinations are required to be taken within one calendar year from the date on the original Letter of Notification or Letter of Approval sent to the applicant. One transfer is permitted within that year, subject to the administrative fees detailed below. Failure to take examinations within that one-year period will result in forfeiture of all fees to ASNT.

The transfer or cancellation deadline is two (2) calendar weeks prior to the week of a scheduled examination. Transfers or cancellations received before the deadline will be subject to a \$75.00 administrative fee PER METHOD. A transferring applicant must remit those administrative fees to ASNT by the application deadline for the rescheduled examination. No examination attendance will be permitted unless all fees are paid. Canceling applicants will receive a refund less all administrative fees.

No transfers or cancellations will be accepted after the above transfer deadline. Failure to show up ("No Shows") for scheduled examinations will result in forfeiture of the fees for the missed examinations.

If an examination application is received and the applicant is found to be unqualified to take the examination, a refund will be issued less an administrative fee of \$75.00 PER METHOD.

All requests for transfers or cancellations must be submitted in writing to ASNT and be signed by the person registered for the examination. A signed fax transmittal is acceptable.

The International Surcharge and Membership Fees are non-refundable and non-transferable.

No exceptions will be made to the above policy.

Code of Ethics for ACCP™ Level II Personnel Certified by ASNT

1.0 Purpose

The following Code of Ethics is binding upon every individual who possesses a current ACCP™ Level II Certification. These rules are necessary to protect the life, health, property and welfare of the public, and to maintain the credibility of the ASNT Central Certification Program and the NDT profession. Accordingly, each ACCP™ Level II certified individual agrees to:

2.0 Code of Ethics

- 2.1 Responsibility: Protect the safety, health and welfare of the public, by performing all NDT activities to the best of his/her ability in accordance with properly established and approved procedures and only in situations for which qualified.
- 2.2 Integrity: Perform all NDT activities honestly, and treat the public, clients and employer in an impartial and ethical manner. All reports of NDT activities shall faithfully and accurately reflect the tests conducted, procedures used, and results obtained.
- 2.3 Conflict of Interest: Consciously avoid conflict of interest situations with employer or client, promptly informing same if such situations cannot be avoided.
- 2.4 Improper Conduct: Refrain from work activities outside the area of certification without written approval of his/her supervisor.
- 2.5 Safety: Act in a safe and responsible manner while conducting NDT activities, ensuring that all required and necessary safety procedures are in place and are being used by one's self and others under his/her jurisdiction.

3.0 Penalty

Violation of this Code of Ethics by any ACCP™ certified Level II person may be cause for disciplinary action against that person.

Examination Scheduling

ACCP Level II renewal examinations may be scheduled and taken up to <u>nine (9) months</u> prior to the applicant's current expiration date, which is the last day of the month listed on the certificate. Successful renewals will be dated from the current expiration date, *not* the examination date.

Applicants are encouraged to examine as early as possible so that if they do not pass these examinations they will have time to retake the full set of initial certification examinations (per applicable techniques) prior to expiration and keep their current certifications from expiring.

ASNT Individual Membership Application & Renewal Form

Member Information

Last Name	Fire	st Name		M.I.	Phone
Send Membership Materials to:	O Home	O Office	Former Member:	O Yes	O No

Join now for immediate and significant savings on examination fees. Save \$75 per method.

Earn recertification points for ASNT membership.

Align with your certification period and consider joining for five years to receive maximum savings.

There is no better network for you to be connected when it comes to your NDT career.

Stay informed throughout your certification period by maintaining membership along with your certification.

ASNT membership keeps you informed of the latest in technology in addition to savings on certification exams.

ASNT membership includes:

• 25% discount on all items purchased from our Publications Catalog or Shop ASNT online at www.asnt.org

- Access to the largest network of NDT contacts and businesses worldwide
- · Materials Evaluation, the authoritative monthly journal on NDT
- Local Section affiliation, provides educational and business networking opportunities
- The quarterly newsletter for NDT practitioners: The NDT Technician
- · Recertification points for membership
- Discounts on national conferences and symposium registration
- Members Only access at <u>www.asnt</u>.org provides publications and networking functions
- Serve on ASNT committees; be part of a group that may effect change or the industry

Become part of the foremost nondestructive testing society and be fully connected to the NDT world.

Membership Options

Renewal Member Dues

To qualify to pay as a renewing member, your membership expiration date must be within six months.

New Member Dues

New members are those joining ASNT for the first time or members having more than a six month gap since expiration. Such rejoining members, are subject to new member rate.

Renewal Member	Dues	*Dues with Airmail Service included	*New Member Dues	*Dues with Airmail Service included	Dues include subscriptions to Materials Evaluation and The NDT Technician.
One-Year	O \$65	O \$113	O \$75	O \$123	For members outside
Two-Year	O \$125	O \$209	O \$135	O \$219	North America: Unless airmail is specified, all materials v
Three-Year	O \$180	O \$294	O \$190	O \$304	will be sent sea/surface mail; allow 3-4 months for delivery.
Five-Year	O \$290	O \$465	O \$300	O \$475	*Airmail service is restricted
Student, One-Year Must submit transcript or letter or enrollment	O \$15	O \$63	O \$15	O \$63	by availability or cost; airmail may not be offered to your
Military Rank E-5 or lower	O \$30	O \$78	O \$30	O \$78	country. You will be contacted if service cannot be provided.

All pricing subject to change.

New member dues include a one-time \$10 administration fee

Dues are nonrefundable, nontransferable. Dues include subscription to Materials Evaluation and The NDT Technician.

Research in Nondestructive Evaluation (RNDE®) Individual Subscription

RNDE® is ASNT's quarterly research journal.		With Airmail Service Included	Add a subscription to ASNT's quarterly research
Print Subscription - for current volume	O \$55	O \$129	journal, <i>RNDE.</i>
Electronic Subscription - for current volume	O \$55		
Print and Electronic Subscription - a savings of \$35 All pricing subject to change.	O \$75	O \$149	

Total Membership Amount \$

Please enter total amount in membership box on page one and add to total.

Be sure to complete the questions on the next page.

app-a2r by exam Page 7 of 8 Rev 3/31/10

Membership Profile 1. Year of Birth 9. Choose the one business segment that best **describes your company.** (select only one) 2. Gender O Male O Female NDT Utilization Business 0 O Medical 3. Highest Education Level Aerospace/Aviation/Aircraft 0 O Nuclear O Grades 1 - 12 Amusement Rides & Skiing O O O Optical High School Diploma Automotive O Chemical & Petroleum O Ordnance Some College O 2-Year Associate Degree Construction O Pipeline O 4-Year Undergraduate Degree O O Pulp/Paper Commercial Labs 0 0 O Railroad Master's Degree Infrastructure (Roads & Bridges) 0 Semiconductor **Doctorate Degree** Electronics \circ Utilities Marine 4. Years of Experience in NDT NDT Supplier Business O1-5 O6-10 O11-15 O16-20 O21 & over O Consulting O Robotics O O Supplies Distributor/Manufacturer's 0 5. Number of people involved with NDT at Representative O Training 0 your company Equipment Computer Software O1-5 O6-20 O21-50 O51-100 O over 100 O Research O Computer Hardware 6. Your Job Function - Choose the one that 10. Choose the primary type of NDT that you do. best describes your role. (select only one) (select only one) O NDT Management O Sales/Marketing Design and Failure Analysis O Quality Management 0 Researcher O Field Inspection O Engineer O Academic/Educator O Incoming Inspection O Technician/Inspector O In-service, Plant/Operation Maintenance & Process Control O Trainer/Instructor O Consultant O Student O Product Life Extension O QA/QC Reliability O None of the above 7. Purchasing Responsibility (select all that apply) 11. Highest Level of NDT qualification I recommend/approve the purchase of: (select only one) O Equipment/Instruments/Supplies 0 None O ASNT NDT Level III O Training & Study Materials/Programs O Level I O ACCP Level II O O Level II O ACCP Level III Services

8. With which NDT method(s) do you work?

I am not involved in purchasing

(select all that apply)

O Acoustic Emission

O Alternating Current Field Measurement

O Electromagnetic/Eddy Current

O Ground Penetrating Radar

O Infrared & Thermal

O Laser

O Leak

O Liquid Penetrant

O Level III O IRRSP

O Magnetic Flux Leakage

O Magnetic Particle

O Neutron Radiography

O Radiography

O Ultrasonics

O Vibration Analysis

O Visual

For Questions Contact the Membership Department at:

Phone **614.274.6003**

Toll Free 800.222.2768 (US/Canada)