ASNT IDENTIFICATION NUMBER
If you have previously been given an ASNT Identification Number, please enter in this box:  

CONTACT INFORMATION

Primary E-mail Address: ________________________________________________________________

You must provide your e-mail address to apply for an ASNT Certification. This must belong to you and cannot be a shared e-mail address. It will be used for all ASNT communications and will be your username for www.asnt.org.

Name-Print your name. Your name should match your identification.

First (Given) Name ________________________ Middle (Additional) Name ________________________ Last Name (Family Name/Surname) ________________________ Suffix (Jr, Sr, II)

Address-Print your mailing address. This address will be used for your certification materials.

Address Type: Home ☐ Business ☐

Organization Name ________________________

Address ____________________________________________________________

Address ____________________________________________________________

City ________________________ State/Province ________________________ ZIP/Postal Code ________________________ Country ________________________

Additional Contact Information

Primary Phone ________________________ Alternate Phone ________________________

Alternate E-mail Address ________________________________________________

FEES

All fees are in US dollars. Save on certification fees by becoming an ASNT member. See Membership Application at end of this application.

<table>
<thead>
<tr>
<th>Fee Description</th>
<th>See Fee Charts for Domestic and International on the next two pages.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Examination Total</td>
<td></td>
</tr>
<tr>
<td>Method Examination Total</td>
<td></td>
</tr>
<tr>
<td>Membership Option</td>
<td>Take advantage of member pricing now by completing the Membership Application and include the total here.</td>
</tr>
</tbody>
</table>

Total Due

Payment Applications will not be processed without payments.

[ ] Visa [ ] Mastercard [ ] Discover [ ] American Express [ ] Checks (Must be in US dollars and drawn on a US bank.) [ ] Funds Transfer (Contact ASNT for wire instructions.)

Name on Card: ________________________

Card Number: ________________________

Expiration Date: ________________ CIN Number*: ________________________

*Credit Card Identification Number: 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.

Signature: ________________________ Date: ________________________
Method or Discipline Selection

Please apply for the method or discipline that you are seeking certification. NOTE: This application is valid for initial certification and for re-certification by examination. To renew without further examination (by points), you must use the ASNT Level III Renewal Application.

Schedule Exams

All exams will be computer-based unless otherwise specified. After you have been approved, paid all application and exam sitting fees, you will receive e-mail notification and instructions to schedule your exam. Examination sitting fees are now collected with the application instead of at the time of scheduling.

Place an “X” in the column next to the method, indicating if this is an Initial or Recertification method exam or a retake of an exam that you failed within the last five years. You may request accommodations during testing for special needs by contacting ASNT.

Basic Examination

To become certified as an ASNT NDT Level III, the NDT Basic examination and at last one Method examination must be passed. First time applicants must take the Basic and at least one Method examination. Once certification is achieved, additional methods may be added without retaking the Basic examination. If all certifications lapse, the Basic examination and the Method examination(s) must be retaken to regain certification.

Fees for Candidates in the United States

<table>
<thead>
<tr>
<th>Method Examinations** (Place and X in the column next to the exam you want to take.)</th>
<th>Initial or Recertification</th>
<th>Retake of Failed Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination</td>
<td>ASNT Member Fee</td>
<td>Non-Member Fee*</td>
</tr>
<tr>
<td>NDT Basic Exam—Required for initial ASNT NDT Level III Certification</td>
<td>$450</td>
<td>$525</td>
</tr>
<tr>
<td>Acoustic Emission testing (AE)</td>
<td>$450</td>
<td>$525</td>
</tr>
<tr>
<td>Electromagnetic Testing (ET)</td>
<td>$450</td>
<td>$525</td>
</tr>
<tr>
<td>Infrared/Thermal (IR)</td>
<td>$430</td>
<td>$505</td>
</tr>
<tr>
<td>Leak Testing (LT)</td>
<td>$450</td>
<td>$525</td>
</tr>
<tr>
<td>Magnetic Flux Leakage (ML)</td>
<td>$430</td>
<td>$505</td>
</tr>
<tr>
<td>Magnetic Particle Testing (MT)</td>
<td>$430</td>
<td>$505</td>
</tr>
<tr>
<td>Liquid Penetrant Testing (PT)</td>
<td>$430</td>
<td>$505</td>
</tr>
<tr>
<td>Radiographic Testing (RT)</td>
<td>$450</td>
<td>$525</td>
</tr>
<tr>
<td>Ultrasonic Testing (UT)</td>
<td>$450</td>
<td>$525</td>
</tr>
<tr>
<td>Visual Testing (VT)</td>
<td>$430</td>
<td>$505</td>
</tr>
</tbody>
</table>

Total of Methods

* You may take advantage of ASNT Member pricing now by becoming an ASNT Member or renewing your membership with this application.

**Exam Sitting Fee that was previously collected at the Authorized Exam Center at time of examination is now being collected at time of application and is included in the exam fee.
### Fees for International Candidates

(Domestic Fees on previous page)

**Method Examinations**
(Place and X in the column next to the exam you want to take.)

<table>
<thead>
<tr>
<th>Examination</th>
<th>Initial or Recertification</th>
<th>Retake of Failed Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ASNT Member Fee</td>
<td>Non-Member Fee*</td>
</tr>
<tr>
<td>NDT Basic Exam—Required for initial ASNT NDT Level III Certification</td>
<td>$490</td>
<td>$565</td>
</tr>
<tr>
<td>Acoustic Emission testing (AE)</td>
<td>$490</td>
<td>$565</td>
</tr>
<tr>
<td>Electromagnetic Testing (ET)</td>
<td>$490</td>
<td>$565</td>
</tr>
<tr>
<td>Infrared/Thermal (IR)</td>
<td>$470</td>
<td>$545</td>
</tr>
<tr>
<td>Leak Testing (LT)</td>
<td>$490</td>
<td>$565</td>
</tr>
<tr>
<td>Magnetic Flux Leakage (ML)</td>
<td>$470</td>
<td>$545</td>
</tr>
<tr>
<td>Magnetic Particle Testing (MT)</td>
<td>$470</td>
<td>$545</td>
</tr>
<tr>
<td>Liquid Penetrant Testing (PT)</td>
<td>$470</td>
<td>$545</td>
</tr>
<tr>
<td>Radiographic Testing (RT)</td>
<td>$490</td>
<td>$565</td>
</tr>
<tr>
<td>Ultrasonic Testing (UT)</td>
<td>$490</td>
<td>$565</td>
</tr>
<tr>
<td>Visual Testing (VT)</td>
<td>$470</td>
<td>$545</td>
</tr>
</tbody>
</table>

**Total of Methods**

*You may take advantage of ASNT Member pricing now by becoming an ASNT Member or renewing your membership with this application.*

**Exam Sitting Fee** that was previously collected at the Authorized Exam Center at time of examination is now being collected at time of application and is included in the exam fee.
Education & Experience Requirements

ASNT Level III Applicants must satisfy one of the following eligibility criteria:

- Graduated from a minimum four-year college or university curriculum with a degree in engineering or a physical science, plus one year (12 months) of experience in nondestructive testing in an assignment comparable to that of a Level II in the applicable test method(s), as defined in ASNT’s Recommended Practice No. SNT-TC-1A, latest edition; OR

- Completed with passing grades at least two full academic school years of engineering or physical science study at a university, college, or technical school, plus two years (24 months) of experience in nondestructive testing in an assignment comparable to that of an Level II in the applicable test method(s), as defined in ASNT’s Recommended Practice No. SNT-TC-1A, latest edition.

- Four years (48 months) of experience in an assignment at least comparable to that of a Level II in the applicable test method(s), as defined in ASNT’s Recommended Practice No. SNT-TC-1A, latest edition.

If you do not satisfy the above criteria for the method(s) in which you are applying, please do not submit an application. Applications received from ineligible applicants will be returned to the applicant in accordance with the Transfer/Cancellation/Refund Policy. It is your responsibility to determine your own eligibility.

Each time a new examination is attempted, you must supply documentary evidence of education and experience appropriate for that examination. Do not rely on past applications to meet this requirement. Recertifying and retaking personnel need only submit information new since the last application.

Education

You must attach documentation for education if you are using post-secondary education to meet the Education and Experience Requirements. Copies of diplomas or transcripts are acceptable. All documentation must be in English or accompanied by an English translation.

<table>
<thead>
<tr>
<th>Level of Post-Secondary Education</th>
<th>List the name and address of the institution where your highest level of education was obtained as it relates to your ASNT Certification.</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Not Applicable</td>
<td>Institution Name ____________________________________________________________________________________________________________</td>
</tr>
<tr>
<td>☐ 2 or more years of college in</td>
<td>Address _______________________________________________________________________________________________________________________</td>
</tr>
<tr>
<td>Engineering or Science</td>
<td>__________________________________________</td>
</tr>
<tr>
<td>☐ 2-year Technical/College Degree</td>
<td>Major Course of Study ______________________________________________________________________________________________________</td>
</tr>
<tr>
<td>☐ 4-year College Degree</td>
<td>Degree ______________________________________________________________________________________________________________________</td>
</tr>
</tbody>
</table>
Experience – This section must be filled out.

List in chronological order all employment you wish ASNT to consider as qualifying experience with most recent (including present employer) position first. Use a separate form for each employer from which you are submitting qualifying experience. Only submit the attestation for your latest certifying employer.

You must supply documentary evidence of initial Level II or equivalent experience (as described in ASNT’s Recommended Practice SNT-TC-1A, Paragraph 6.3) to meet the minimum experience requirements in the method(s) for which you are applying. If you have legacy experience 10 years prior to submitting your application and have exhausted all options to obtain previous experience documentation from an employer, attestation may be submitted for review and consideration.

You are required to submit documentation supporting your work experience. Acceptable documentation can include: inspection log books, inspection reports, employer or third-party certificates or certification records, human resources records, or for self-employed personnel, signed statements from at least two (2) customers. All documentation must be in English or accompanied by an English translation.

Supporting Documents MUST state:
1. Level of qualification or Level II job duties
2. Number of months working as a Level II

Other supporting documents that are NOT accepted:
1. Certificate of Training/Non-employer issued qualifications
2. Level I Certificates

Name _____________________________________________________________________
First Name _____________________________________________________________________
Middle Name _____________________________________________________________________
Last Name _____________________________________________________________________
Position # ______
Dates of Employment __________________________
Start Date __________________________
End Date __________________________
Total Time (Months) __________________________
Organizations Name _____________________________________________________________________
Employer/Customer Contact Name _____________________________________________________________________
Organization Address _____________________________________________________________________
City _____________________________________________________________________
State/Prov. _____________________________________________________________________
ZIP/Postal Code _____________________________________________________________________
Country _____________________________________________________________________
Phone _____________________________________________________________________
Fax _____________________________________________________________________
E-mail _____________________________________________________________________

List experience (months performing work with Level II qualifications) by method as related to above employer.

Dates of initial Level II Certificate for each method: _______________________________________________________

<table>
<thead>
<tr>
<th>Method</th>
<th>Technique</th>
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<th>Application</th>
<th>Role</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>UT</td>
<td>Shear Wave</td>
<td>Refining</td>
<td>ASME V, Pipe &amp; vessel welds</td>
<td>Level II Tech</td>
<td>01-21-15 01-21-17</td>
</tr>
</tbody>
</table>

Note: 1 month is equivalent to 160 hours.

Document the experience gained as a Level II related to the above employer and list the documents(s) that are attached to this application providing evidence of Level II certification.

Attached Documents: _____________________________________________________________________

Example

<table>
<thead>
<tr>
<th>Method</th>
<th>Technique</th>
<th>Industry</th>
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</tr>
</tbody>
</table>
Statement of Attestation – This form must be filled out.

Submit this attestation from the employer in which the latest certification was attained. A minimum of 2 signatures shall be provided for certification. The following signed statement attests to the accuracy and validity of the documentation evidence submitted for certification. As an Employer, Level III, NDT Supervisor or Customer, I have reviewed the documentation and understand that any misrepresentation would be considered a breach of the ASNT Code of Ethics.

**Employer** – A management level representative of the company having direct knowledge of the applicant’s duties and being familiar with the company’s certification process.

**Certifying Level III or NDT Supervisor** – The Level III directly responsible for the certification of the applicant. May be an ASNT III, ACCP III, Company III, Responsible III, Level III of Record or 3rd Party Level III. When working in a position comparable to that of Level II, the NDT Supervisor is the person most responsible for direction of the day to day work of the applicant.

**Customer (Self-Employed Only)** – Must be a customer having direct knowledge of the applicant’s inspection duties and abilities. Customer attests that the applicant has performed testing in the method applied for during the specific time-period.

**Position # ______________**

<table>
<thead>
<tr>
<th>EMPLOYER</th>
<th>CERTIFYING LEVEL III OR NDT SUPERVISOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Name:</td>
</tr>
<tr>
<td>Title:</td>
<td>Title:</td>
</tr>
<tr>
<td>Relation to Applicant:</td>
<td>Relationship to Applicant:</td>
</tr>
<tr>
<td>Dates Covered:</td>
<td>Dates Covered:</td>
</tr>
<tr>
<td>E-mail:</td>
<td>E-mail:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Phone:</td>
</tr>
<tr>
<td>ASNT ID (if applicable)</td>
<td>ASNT ID (if applicable)</td>
</tr>
<tr>
<td>Signature:</td>
<td>Signature:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CUSTOMER</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
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</tr>
<tr>
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<td>E-mail:</td>
</tr>
<tr>
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</tr>
<tr>
<td>ASNT ID (if applicable)</td>
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ASNT Level III Experience and Attestation Form 09 June 2020
Experience – This section must be filled out.

List in chronological order all employment you wish ASNT to consider as qualifying experience with most recent (including present employer) position first. Use a separate form for each employer from which you are submitting qualifying experience. Only submit the attestation for your latest certifying employer.

You must supply documentary evidence of initial Level II or equivalent experience (as described in ASNT's Recommended Practice SNT-TC-1A, Paragraph 6.3) to meet the minimum experience requirements in the method(s) for which you are applying. If you have legacy experience 10 year prior to submitting your application and have exhausted all options to obtain previous experience documentation from an employer, attestation may be submitted for review and consideration.

You are required to submit documentation supporting your work experience. Acceptable documentation can include: inspection log books, inspection reports, employer or third-party certificates or certification records, human resources records, or for self-employed personnel, signed statements from at least two (2) customers. All documentation must be in English or accompanied by an English translation.

Supporting Documents MUST state:
1. Level of qualification or Level II job duties
2. Number of months working as a Level II

Other supporting documents that are NOT accepted:
1. Certificate of Training/Non-employer issued qualifications
2. Level I Certificates

Name _____________________________________________________________________
First Middle Last ASNT ID

Position # _________ Dates of Employment

Start Date End Date Total Time (Months)

Organization Name _____________________________________________________________________

Employer/Customer Contact Name _____________________________________________________________________

Organization Address _____________________________________________________________________

City State/Prov. ZIP/Postal Code Country

Phone Fax E-mail

List experience (months performing work with Level II qualifications) by method as related to above employer.

Dates of initial Level II Certificate for each method: _____________________________________________________________________

AE____# of months ET____# of months IR____# of months LT____# of months ML____# of months

MT____# of months PT____# of months RT____# of months UT____# of months VT____# of months

Note: 1 month is equivalent to 160 hours.

Document the experience gained as a Level II related to the above employer and list the documents(s) that are attached to this application providing evidence of Level II certification.

Attached Documents: _____________________________________________________________________

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ASNT Level III Experience and Attestation Form 09 June 2020
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1. Level of qualification or Level II job duties
2. Number of months working as a Level II

Other supporting documents that are NOT accepted:
1. Certificate of Training/Non-employer issued qualifications
2. Level I Certificates

Name ______________________ ______________________ ______________________ ASNT ID ______________________

Position # ______ Dates of Employment ______ Start Date ______ End Date ______ Total Time (Months) ______

Organization Name __________________________________________

Employer/Customer Contact Name __________________________________________

Organization Address __________________________________________

City ______ State/Prov. ______ ZIP/Postal Code ______ Country ______

Phone ______ Fax ______ E-mail ______

List experience (months performing work with Level II qualifications) by method as related to above employer.

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Example

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ASNT Level III Experience and Attestation Form 09 June 2020
Application 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. Failure to take examinations within that one-year period will result in forfeiture of all fees to ASNT.

For computer-based testing exams, exam can be rescheduled and cancelled 48 hours prior to the appointment without any additional fees. If you cancel within 48 hours, then the sitting fee portion of your fees plus a $75 administrative fee per exam will apply.

For Practical exams, 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 administrative fee PER EXAMINATION.

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. Cancelling 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 PER EXAMINATION. All exam sitting fees will be refunded.

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. Membership Fees are non-refundable and non-transferable.

Statements and Signature

By signature on this application, if certified by ASNT, I agree to abide by the Code of ethics for Level III Personnel Certified by ASNT 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 the 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 III 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 prerequisite for having filed application for consideration by ASNT. The undersigned further represents that if not certified by ASNT, then the 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 transfer, cancellation, and refund policy and understand that all application documents submitted to ASNT become the property of ASNT.

I agree not to release confidential examination materials or participate in fraudulent test-taking practices.

I understand that I am required to inform ASNT of matters that affect my capability to continue to fulfill the requirements of my certification(s). Failure to do so may result in the suspension or revocation of my certification(s) by ASNT.

Signature of Applicant

Print Name of Applicant

Date

Submit Application

Online: If you would prefer to submit your documents and fee securely on the ASNT website, go to this area of our website, by clicking the link below.

Start Your Application Process Here

Mail: Mail this application attachments, and fees to ASNT at:

ASNT
1711 Arlingate Lane
Columbus, OH 43228-0518 US

Make checks payable to ASNT.

Please do not submit your application more than once.
CODE OF ETHICS FOR LEVEL III PERSONNEL CERTIFIED BY ASNT

1. Preamble

1.1. In order to safeguard the life, health, property, and welfare of the public, to maintain integrity and high standards of skills and practices in the profession of nondestructive testing, the following rules of professional conduct shall be binding upon every person issued a certificate by ASNT as a Level III.

1.1.1. The Level III who holds a certificate is charged with having knowledge of the existence of the reasonable rules and regulations hereinafter provided for his/her conduct as ASNT Level III, and also shall be familiar with their provisions and understand them. Such knowledge shall encompass the understanding that the practice of nondestructive testing under this certification is a privilege, as opposed to a right, and the Level III shall be forthright and candid in statements or written responses to the Ethics Committee of the Certification Management Board.

1.1.2. The “Level III” as referred to herein is that individual who has been issued a certificate by the American Society for Nondestructive Testing, Inc. pursuant to its heretofore published requirements, rules, and procedures for such certification. This Code of Ethics is binding upon all individuals so certified.

2. Integrity

2.1. The Level III is obligated to act with complete integrity in professional matters for each client or employer as a faithful agent or trustee; shall be honest and impartial; and shall serve the public, clients, and employer with devotion;

2.2. The Level III shall make claims regarding certification only with respect to the scope for which certification has been granted; and

2.3. The Level III shall not to use their certification in a misleading manner or in such a manner as to bring ASNT into disrepute. The Level III shall not make any statement regarding the certification, which ASNT may consider misleading or unauthorized.

3. Responsibly to ASNT

The Level III Shall:

3.1. Immediately report to ASNT any perceived violation(s) of this Code of Ethics or any attempt to pressure or force a certified individual to violate this Code of Ethics.

3.2. Not attempt to cheat on ASNT examinations, attempt to bribe or threaten ASNT / Pearson Vue or other third party testing personnel, falsify documents, falsely claim, misrepresent or permit misrepresentation or misuse of their own or others professional qualifications, knowledge, training, experience, work responsibilities, or certifications.

3.3. Inform employer / client in the event that certification is suspended, cancelled, or withdrawn and return to ASNT Level III certificate and wallet card immediately; and

3.3.1 Immediately discontinue the use of the ASNT logo. Due to ASNT’s trademark copyright, ASNT logo is not to be use by any individual or entity without the explicit written consent of ASNT.

4. Responsibility to the Public

The Level III shall:

4.1. Protect the safety, health, and welfare of the public in the performance of professional duties. Should the case arise where the Level III faces a situation where the safety, health, and welfare of the public are not protected, he/she shall:

4.1.1. Apprise the proper authority if it is evident that the safety, health, and welfare of the public are not being protected; and

4.1.2. Refuse to accept responsibility for the design, report, or statement involved; and

4.1.3. If necessary, sever relationship with the employer or client; and

4.1.4. Undertake to perform assignments only when qualified by training and experience in the specific technical fields involved. In the event a question arises as to the competence of a Level III to perform an assignment in a field of specific discipline which cannot be otherwise resolved to the Ethics Committee’s satisfaction, the Ethics Committee, either upon request of the Level III, or by its own volition, may require him/her to submit to an appropriate inquiry by or on behalf of the Ethics Committee; and

4.1.5. Be completely objective in any professional report, statement, or testimony, avoiding any omission which would, or reasonably could, lead to fallacious inference, finding, or misrepresentation; and

4.1.6. Express an opinion as a technical witness before any court, commission, or other tribunal, only when such opinion is founded upon adequate knowledge of the facts in issue, upon a background of technical competence in the subject matter, and upon an honest conviction of the accuracy or propriety of the testimony.

5. Public Statements

5.1. The Level III will issue no statements, criticisms, or arguments on nondestructive testing matters connected with public policy which are inspired or paid for by an interested party, or parties, unless he/she has prefaced the remark(s) by explicitly identifying himself/herself, by disclosing the identities of the party, on whose behalf he/she is speaking, and by revealing the existence of any pecuniary interest he/she may have in these matters.

5.2. The Level III will publicly express no opinion on a nondestructive testing matter unless it is founded
upon adequate knowledge of the facts in issue, upon a background of technical competence in the subject matter, and upon honest conviction of the accuracy and propriety of the testimony.

5.3. The Level III shall show professional and appropriate behavior, including, but not limited to, online and social media. The term “social media” is used within this Code to describe dynamic and socially interactive networked information and communication technologies by which personal information or opinions can be presented for public consumption on the Internet.

6. Conflict of Interest

6.1. The Level III shall conscientiously avoid conflict of interest with the employer or client, but when avoidable, shall forthwith disclose the circumstances to the employer or client.

6.2. The Level III shall promptly inform the client or employer of any business associations, interests, or circumstances which could influence his/her judgment or the quality of services to the client or employer.

6.3. The Level III shall not accept compensation, financial or otherwise, from more than one party for services on the same project, or for services pertaining to the same project, unless the circumstances are fully disclosed to, and agreed to, by all interested parties or their duly authorized agents.

6.4. The Level III shall not solicit or accept financial or other valuable consideration from material or equipment suppliers for specifying their products.

6.5. The Level III shall not solicit or accept gratuities, directly or indirectly, from contractors, their agents, or other parties dealing with the client or employer in connection with work for which he/she is responsible.

6.6. As an elected, retained, or employed public official, the Level III (in the capacity as a public official) shall not review or approve work that was performed by himself/herself, or under his/her direction, on behalf of another employer or client.

7. Solicitation of Employment

7.1. The Level III shall not pay, solicit, nor offer, directly or indirectly, any bribe or commission for professional employment with the exception of payment of the usual commission for securing salaried positions through licensed employment agencies.

7.2. The Level III shall seek professional employment on the basis of qualification and competence for proper accomplishment of work.

7.3. The Level III shall not falsify or permit misrepresentation of his/her, or his/her associates’, academic or professional qualification. He/she shall not misrepresent or exaggerate the degree of responsibility in or for the subject matter of prior assignments.

7.4. Brochures or other presentations incident to the solicitation of employment shall not misrepresent pertinent facts concerning employers, employees, associates, joint ventures, or past accomplishments with the intent and purpose of enhancing qualifications and work.

8. Improper Conduct

8.1. The Level III shall not sign documents for work for which he/she does not have personal professional knowledge and direct technical supervisory control and responsibility.

8.2. The Level III shall not knowingly associate with, or permit the use of, his/her name or firm name in a business venture by any person or firm which he/she knows, or has reason to believe is engaging in business or professional practices of a fraudulent or dishonest nature.

8.3. The Level III shall conduct themselves in an honest and ethical manner. It is expected that Level III’s observe all laws applicable to our business, including but not limited to international, federal, state/provincial and local laws.

8.4. While this code addresses may ethical issues, it cannot address every issue that a Level III may encounter. As such, if a situation arises in which a Level III is unsure if an action would be deemed unethical, the Level III may consult ASNT.

9. Unauthorized Practice

9.1. Any violation of this code shall be deemed to be an unauthorized practice and upon proper complaint, investigation, due process hearing and ruling of the Ethics Committee of the ASNT Certification Management Council in accordance with procedures heretofore established and published, sanctions may be applied to the individual(s) in violation.

9.2. If the applied sanction is suspension or revocation of certification, the certificate holder agrees to discontinue all claims of ASNT certification and must return all certificates and wallet cards issued by ASNT.

10. Rulings of Other Jurisdictions
Conviction of an NDT-related felony while ASNT certification is valid or the revocation or suspension of a Professional Engineer’s License by another jurisdiction or similar rulings by other professional associations may be grounds for a charge of violation of this Code.

I agree to abide by this Code of Ethics.

Name (Please Print)

Signature

Date (MM/DD/YYYY)
# ASNT Individual Membership Application

Please complete both sides of this form.

## Member Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Mr./Ms.</th>
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<td>State</td>
<td>Zip/Postal Code</td>
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<tr>
<td>Country</td>
<td>Phone</td>
<td>Fax</td>
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<tr>
<td>Company Name</td>
<td></td>
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| Company Address |          |      |         |
| City           | State    | Zip/Postal Code |

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<thead>
<tr>
<th>Country</th>
<th>Business Phone</th>
<th>Business Fax</th>
</tr>
</thead>
</table>

| Business E-mail |          |          |
| Send Materials to: | Home | Office |

If recruited, by whom? ____________________________

## Local Section (Chapter) Choice

Choices posted online at asnt.org/sections

## Member Profile

### 1. Date of Birth ____________________________

### 2. Gender

- [ ] Male
- [ ] Female

### 3. Education (Check highest level)

<table>
<thead>
<tr>
<th>Level</th>
<th>Enrolled</th>
<th>Completed</th>
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<td>Some College</td>
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<tr>
<td>2-Year Associate Degree</td>
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<td>4-Year Bachelor Degree</td>
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<tr>
<td>Master's Degree</td>
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<tr>
<td>Doctorate Degree</td>
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</table>

If enrolled, expected graduation date ____________________________

### 4. Years of Experience in NDT

- [ ] 0–5
- [ ] 6–10
- [ ] 11–15
- [ ] 16–20
- [ ] 21 & over

### 5. Number of people involved with NDT at your company

- [ ] 1–5
- [ ] 6–20
- [ ] 21–50
- [ ] 51–100
- [ ] over 100

### 6. What is your job title? ____________________________

### 7. Your Job Function—Choose the one which best describes your role. (select only one)

- [ ] Academic/Educator
- [ ] Consultant
- [ ] Engineer
- [ ] NDT Management
- [ ] Researcher
- [ ] Sales/Marketing
- [ ] Student
- [ ] Technician/Inspector
- [ ] Trainer/Instructor
- [ ] Quality Management

### 8. Purchasing Responsibility (select all that apply)

- [ ] I recommend/approve purchase of equipment/instruments/supplies
- [ ] I recommend/approve purchase of training & study materials/programs
- [ ] I recommend purchase of services
- [ ] I am not involved in purchasing

### 9. With which NDT method(s) do you work? (select all that apply)

- [ ] Acoustic Emission
- [ ] Alternating Current Field Measurement
- [ ] Electromagnetic/Eddy Current
- [ ] Guided Wave
- [ ] Laser
- [ ] Leak
- [ ] Liquid Penetrant
- [ ] Magnetic Flux Leakage
- [ ] Neutron Radiography
- [ ] Radiography
- [ ] Visual
- [ ] Microwave
- [ ] Ultrasonics
- [ ] Vibration Analysis

Complete both sides of this form and mail or fax to:

ASNT, PO Box 28518, Columbus, OH USA 43228–0518
Fax 614.274.6899
Join online at asnt.org

For Questions Contact Customer Service:
Phone 614.274.6003
Toll Free 800.222.2768 (US/Canada)

Rev 04/2020
Last Name First Name

**Member Profile**

10. Choose the primary business industry segment that best describes your company. (select only one)

- NDT Utilization Business
  - Aerospace/Aviation/Aircraft
  - Amusement Rides & Skiing
  - Automotive
  - Chemical & Petroleum
  - Construction
  - Commercial Labs
  - Infrastructure (Roads & Bridges)
  - Electronics
  - Marine

- NDT Supplier Business
  - Consulting
  - Distributor/Manufacturers’ Representative
  - Equipment
  - Research

Membership Categories

- Student (1 year; requires proof of full-time student enrollment)
- New NDT Professional (1 year; early career with less than 5 years in NDT)
- NDT Professional (1 year)
- NDT Professional (2 year)
- NDT Professional (3 year)
- NDT Professional (5 year)
- Active Military (1 year; active service members)
- Retired (1 year; eligibility verification required)
- Lifetime (eligibility verification required)

<table>
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<tr>
<td>New NDT Professional</td>
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<tr>
<td>NDT Professional</td>
<td>$300.00</td>
<td>$475.00</td>
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<tr>
<td>Active Military</td>
<td>$30.00</td>
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</tr>
<tr>
<td>Retired</td>
<td>$15.00</td>
<td>N/A</td>
</tr>
<tr>
<td>Lifetime</td>
<td>$600.00</td>
<td>N/A</td>
</tr>
</tbody>
</table>

11. Choose the primary type of application of NDT that you do? (select only one)

- Medical
- Nuclear
- Optical
- Ordinance
- Pipeline
- Pulp/Paper
- Railroad
- Semi Conductor
- Utilities
- Robotics
- Supplies
- Training
- Computer Software
- Computer Hardware

12. Highest Level of NDT qualification. (select only one)

- None
- ASNT NDT Level III
- Level I
- ACCP Level II
- Level II
- ACCP Level III
- Level III
- IRRSP
- Other ____________________________________________

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- Type of Card: Personal Business
- Account Number: __________________________ Exp. Date _________ CIN*
- Name on Card: ____________________________
- Signature: ________________________________
- Cardholder Information: ____________________

*Credit Card Identification Number. For Visa/MasterCard/Discover: The three-digit value is printed on the signature panel on the back of cards immediately following the account number. For American Express: 4 digit, non-embossed number printed above your account number on the face of your card.

Return with payment to The American Society for Nondestructive Testing, Inc., PO Box 28518, Columbus OH 43228-0518; Or join online at asnt.org, Fax 614.274.6899, Phone 614.274.6003 or 800.222.2768 US/Canada. Federal ID# 31-1231529.