



Statement of Professional Experience (model) Non-Destructive Testing

I, _____
(Responsible Person of the Employing Entity)

with the civil identification number _____,

in the position of _____
(Candidate supervisor or other position in the company)

in the company _____,
(Employing Entity)

Note: In case the candidate for certification is the employer himself, he will have to present evidence from clients (eg: declaration of experience, contracts; test reports executed by the technician and validated by the client, etc.).

DECLARE

that _____
(Full name of the certification candidate)

with the civil identification number _____ performs (or performed) functions in this company from _____ to _____ (dd/mm/yy), performing Non-Destructive Testing, as detailed in the table below:

EXPERIENCE ^(a) (in each method and sector)									
METHOD	SECTOR	Metallic Fabrication		Welds		Metallic Materials		TOTAL	
		Hours	Days	Hours	Days	Hours	Days	Hours	Days
Visual testing [VT]		N/A				N/A			
Penetrant testing [PT]									
Magnetic testing [MT]									
Radiographic testing [RT]									
Ultrasonic testing [UT]									
Thickness Measurement		N/A		N/A					
Radiographic Interpretation		N/A				N/A			

(a) Experience in days is achieved by dividing the total accumulated hours by 7. It is not possible to acquire experience in simultaneous for more than one method.

The experience referred to in the table^(b) was supervised by : _____

Certificate number _____, telephone contact: _____

I hereby declare that the information provided is true and correct,

Date:,, 20.....

(Supervisor's Signature)

(Signature and Stamp of the Employing Entity)

(b) If the supervisor is not certified in the same method, he must provide evidence of his competence, namely records of relevant training and professional experience (curriculum vitae + evidence).