



PSL 57A

ISSUE 13 DATED 1st JANUARY 2017

IMPLEMENTATION 1st JANUARY 2017

APPLICATION FOR;
INITIAL examination

COMPLETED APPLICATIONS MUST BE SUBMITTED DIRECTLY TO THE AQB (PSL-4)
DO NOT SEND TO BINDT.

GENERAL INFORMATION (please read carefully before completing application).

This form is to be used for candidates for initial examination in any PCN designated NDT method and industry or product sector. Form PSL/57B is to be used for recertification and supplementary examinations, or a retest of previously failed initial examinations.

All candidates for PCN examination and certification are required to fulfill the conditions for eligibility specified in clause 7 of the current edition of the PCN General Requirements for Certification of NDT Personnel.

Eligibility is defined in terms of visual acuity and colour perception, training, and experience. Attention is drawn to opportunities for mature candidates who may satisfy special eligibility criteria (PCN General Requirements refer). Candidates will be required to supply verifiable evidence of satisfying all eligibility criteria and PCN publishes the following documents, all of which are available free of charge, for use in recording and providing such information in an acceptable format.

Candidates shall supply, to the AQB, verifiable evidence of satisfying all eligibility criteria i.e. valid visual acuity and experience prior to booking an examination, in the event that BINDT discovers that the required evidence of eligibility is not submitted, any examination results or certification awarded will be null and void.

CP16 Annex D1 (record of employment)

PSL/30 mandatory form for recording certification experience **See Part 5**

PSL/44 PCN Vision Requirements, including optional form for recording results of tests

Initial enquiries for examination appointments **should** be made to the **PCN** Test Centre by telephone. However, no examination appointment can be considered confirmed until a correctly completed application form and supporting information has been received. Applications should be legibly completed.

Once completed, this form and supporting information should be sent to the PCN AQB together with relevant payment information or examination fees. One application form is to be submitted in respect of each examination applied for. Candidates not already having a PCN identity card will need to provide one passport photograph on the day of examination. Please enquire beforehand whether photographic facilities are available at the examination centre.

Applications dependent upon the individual holding (or having held) appropriate certification must be supported by acceptable evidence of such certification. If a photocopy is attached to this application as evidence, the candidate will be required to show the original on the day of the examination.

Where marks from earlier examinations are to be included in the weighted composite grade, the candidate should supply the relevant examination result notice (or, where unavailable, verifiable information from which the date and scope of the examination and the PCN Test Centre where the examination took place can be ascertained). Failure to comply with this requirement may result in a refusal to examine.



The British Institute of Non-Destructive Testing is an accredited certification body offering personnel and quality management systems assessment and certification against criteria set out in international and European standards through the PCN Certification Scheme.



Applications shall only be completed by the candidate seeking PCN certification.
If uncertain of the requirements for this application, please consult the Test Centre or PCN before proceeding.

PART 1. CANDIDATE'S PERSONAL DETAILS

Family name:		Given names:	
Candidate's usual residence, including post code (address that will be shown on the certificate):		Address, including postcode, to which the PCN certificate, when issued, is to be sent.	
CANDIDATE'S SIGNATURE AUTHORISING CERTIFICATE TO BE SENT TO ABOVE ADDRESS:			
Telephone number:		PCN number:	
E-mail address:		Date of birth (dd/mm/yyyy):	
Gender (optional):			
It may be possible to make provision in PCN examinations for disabled candidates. If you are disabled please bring this fact to the attention of the examining body.			

PART 2. CURRENT EMPLOYMENT DETAILS

(CP16 Annex D1 should be used to record past employment.)

Employer's name and address (including telephone number, email address and post code):	
Candidate's position in the organisation:	Employment status (employed or self employed):

PART 3. PRE-CERTIFICATION TRAINING

Attach evidence of satisfactory completion of PCN approved training course or provide the following details for classroom training;

Name of training organisation and title/reference of relevant training course:	
Dates of course (from/to):	

PART 4. EXAMINATION APPLIED FOR (must be completed - check availability with the Test Centre before completing)

Products or industry sector in which certification is sought (castings, welds, forgings/wrought products, pre & in-service inspection, railway or aerospace):							
NDT method (tick only ONE NDT method):	ET	MT	PT	RT	RI	UT	VT
	CRT	TOFD	PAUT				
Level (tick one box). note: RI is level 2 only	1	2	3				
If level 3, state which exam part(s);							
Radiation safety (tick only one box, and ignore sector, NDT method, level and categories)		Basic radiation safety		Radiation protection supervisor			
State in the space below the categories of certification that you seek to attain (see relevant appendix to PCN/GEN). Note that there may be limitations upon the number of categories that may be attempted at any one sitting - consult PCN or the Test Centre for further advice.							
Preferred examination date and venue:							

PART 5. PRE-CERTIFICATION EXPERIENCE

Experience is not an essential pre-requisite for level 1 and 2 examinations only. However, if such evidence is available at the time of examination, and it is a **mandatory** requirement that this be provided direct to the AQB on the PSL 30 Attached.

Industrial NDT Experience – the experience needed to acquire the skill and knowledge to fulfil the provisions of qualification in the appropriate sector, and which is gained under the supervision of Appropriately Qualified Personnel, in the application of the NDT method in the sector concerned.

Qualified supervision – supervision of candidates gaining experience by NDT personnel certificated under the PCN Scheme or by non-certificated personnel who, in the opinion of BINDT, possess the knowledge, skill, training and experience required to properly perform such supervision.

Appropriately Qualified Personnel – Individuals carrying out supervision of candidates for PCN certification holding relevant certification issued by a BINDT recognised certification body meeting the requirements of ISO/IEC 17024.

NOTE: The Supervisors' certificate(s) must be verified as the same level, sector and method and must be valid at the time the experience was gained. This may include certification schemes other than ISO 9712, such as EN 4179 and SNT-TC-1A providing that this certification has been gained using external training/examination support provided by a BINDT approved organisation. The organisation must be a BINDT approved ATO, AQB and/or OA status. Please contact pcn@bindt.org if clarification on this is required.

Experience may be gained following level 1 and 2 examinations only and recorded on Form PSL/30. Once evidence of experience satisfying the above definitions has been accumulated, it is provided direct to PCN, together with an application for certification using form PSL/57C.

Level 3 candidates – must have the required amount of NDT experience prior to taking any examination.

Claimed duration of experience in applying the NDT method under qualified supervision (enter number of months or weeks): PSL 30 to be completed with details:	
Name, address and telephone number or email address of person who can verify experience claimed:	

PART 6. PAYMENT (complete applicable sections only)

Name and address for invoice (if different from candidate's), including telephone/fax number:					
Some Test Centres provide accommodation or information on the availability of local accommodation. If you wish to receive assistance with accommodation, please tick here:					
Preferred method of payment (bank draft, BACS, cheque, credit card):				Tick box if cheque enclosed:	
Name of senior responsible official of the organisation paying examination fees (not the candidate - unless self employed):					
Company order reference:					
For credit card payment, tick the relevant box and provide issue and expiry dates:	Visa	MasterCard	Amex	Switch	Issue and expiry dates:
Name on card:					
Card number:			Security code (last 3 figures on the security strip on the reverse of the card)		
Signature of above named individual					
Address of credit card holder:					
Debit the above credit/debit card for the amount shown in respect of exam fees (check with Test Centre to confirm that credit card payment is available)				£ :	

PART 7. CANDIDATE'S STATEMENT CONFIRMING ELIGIBILITY FOR EXAMINATION

CANDIDATE'S FULL NAME:

PCN NUMBER (if existing PCN certificate holder):

I have read and understand PCN General requirements for the certification of personnel engaged in NDT, particularly the criteria for eligibility, and hereby confirm that I satisfy those criteria covering vision, training and experience applicable to the level and NDT method for which I am seeking certification. In the event that I should be awarded PCN certification. I agree to comply with the PCN Code of Ethics (published as PCN document CP/27).

I understand that, in the event of a false statement being discovered, any certification awarded as a result of the examination will be null and void. I accept responsibility for payment of examination fees in the event of non-payment by the sponsor.

I understand that BINDT will hold and use personal data supplied by me for administration purposes. These purposes have been notified under the Data Protection Act 1998. The data may also be used to send separate unsolicited mailings* containing details of events, new services, products etc..

SIGNATURE: DATE:

* You have the right to ask BINDT not to send such mailings. If you do not wish to receive this information from BINDT, please tick this box []. You also have the right of access to personal data that we hold about you, on payment of an access fee not exceeding £10.

Attach

- a. Vision test certificate (PCN PSL/44 may be used) unless vision test arranged at Test Centre
- b. Evidence of training
- c. Evidence of experience (PCN document PSL/30)
- d. Correct examination fee (unless part 6 of this form is appropriately completed); details of fees are available from the test or examination centre.

Bring

- e. Two passport photographs (unless already a holder of a PCN identity card issued within the past 10 years, or if photographs are to be taken at the Test Centre - check beforehand if facilities are available on site)
- f. Your PCN record of certification and PCN identity card (if already a PCN certificate holder)
- g. Your own NDT instrument if desired (information on acceptable instruments is available from the Test Centre), together with a valid calibration certificate.

PART 8. VERIFICATION OF CANDIDATE'S STATEMENT BY THE SPONSOR, EMPLOYER OR, IF THE CANDIDATE IS SELF-EMPLOYED, A REFEREE.

To the best of my belief, the candidate's statement given above is correct at the time of signing.

NAME: SIGNATURE:

COMPANY: TELEPHONE:

PART 9. FOR OPTIONAL USE BY THE TEST CENTRE

EXAMINATION DATE: EXAMINATION VENUE:

EXAMINER: MODERATOR:

PAYMENT RECEIVED: RESULT REFERENCE:

EXAMINATION FILE COMPLETE AND CLOSED (initials/date):

REMARKS (if any verification sought and obtained, record details below):

LOG OF EXPERIENCE

PSL/30 Issue 9 dated 1st October 2016

IMPLEMENTATION DATE: 1st November 2016

Industrial NDT experience in the applicable NDT method, field of application or inspection application which leads to the acquisition by a PCN candidate of the required skill and knowledge, is to be gained and recorded prior to the award of certification by PCN. In the event that a false statement is made concerning pre-certification experience, any certification awarded as a result will be null and void.

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1. Terms and Definitions:

Inspection Experience – the experience needed to acquire the skill and knowledge to fulfil the provisions of qualification in the appropriate inspection method, and which is gained under the supervision of Appropriately Qualified Personnel, in the application of the inspection method in the sector concerned.

Industrial NDT Experience – the experience needed to acquire the skill and knowledge to fulfil the provisions of qualification in the appropriate sector, and which is gained under the supervision of Appropriately Qualified Personnel, in the application of the NDT method in the sector concerned.

Qualified supervision – supervision of candidates gaining experience by NDT personnel certificated under the PCN Scheme or by non-certificated personnel who, in the opinion of BINDT, possess the knowledge, skill, training and experience required to properly perform such supervision

Appropriately Qualified Personnel – Individuals carrying out supervision of candidates for PCN certification holding relevant certification issued by a BINDT recognised certification body meeting the requirements of ISO/IEC 17024.

NOTE: The Supervisors' certificate(s) must be verified as the same level, sector and method and must be valid at the time the experience was gained.

This may include certification schemes other than ISO 9712, such as EN 4179 and SNT-TC-1A providing that this certification has been gained using external training/examination support provided by a BINDT approved organisation. The organisation must be a BINDT approved ATO, AQB and/or OA status. Please contact pcn@bindt.org if clarification on this is required. **THIS NOTE DOES NOT APPLY TO WELD INSPECTION RECERTIFICATIONS/RENEWALS**

2. Required experience: Levels 1, 2 and 3

The candidate shall have had regular practical experience in the application of the NDT method and this will include a specified period of recorded practical work on site or in works under certificated supervision. The minimum periods of experience for eligibility, which may include the required period of training, are specified below:

	LEVEL 1	LEVEL 2	LEVEL 3
NDT METHOD	(months)	(months)	(months)
ET,RT,UT,TOFD,ACFM	3	9	36
PT,MT,VT,PAUT	1	3	24
RI	N/A	6	N/A
Inspection of Wrought Plate (ISO20807)	N/A	4	N/A
Weld Inspection (does not comply with ISO 9712)	Refer to the latest PCN document PCN WI	Refer to the latest PCN document PCN WI	Refer to the latest PCN document PCN WI

For level 2 certification, work experience normally consists of time as a level 1. However, if the candidate is to qualify directly at level 2 with no time at level 1, the experience will consist of the sum of the periods required for levels 1 and 2.

Level 3

Level 3 responsibilities require knowledge beyond the technical scope of any specific NDT method. This broad knowledge may be acquired through a variety of combinations of education, training and experience. The table above details minimum experience for level 3 candidates.

For level 3 candidates who have successfully completed a degree or diploma at a technical school or completed at least two years of engineering or science study at an accredited college or university, proof of qualifications will be required, may be eligible for a reduction in the amount of experience required by 50%.

For Level 3 certification, the intent is that work experience consists of time as a Level 2. If the individual is being qualified directly from Level 1 to Level 3, with no time at Level 2, the experience shall consist of the sum of the times required for Level 2 and Level 3. No reduction in the period of experience shall be allowed.

Work experience, which is based on a nominal 40 hour working week, may be gained simultaneously in two or more of the NDT methods for which PCN certification is sought, with the reduction of total experience as follows:

- * Two testing methods - reduction of total time required by 25%
- * Three testing methods - reduction of total time required by 33%
- * Four testing methods - reduction of total time required by 50%

NOTE: Level 3 candidates must have the required amount of NDT experience prior to taking any examination.

3. Recording experience

Candidates will be required to provide documented proof, authenticated by an employer or responsible agency (who PCN may contact for verification purposes), of the above work experience before an application for certification can be accepted by PCN. Please list all employers during the period in which experience was gained:

The forms overleaf, which may be freely copied, are intended to assist the PCN candidate in recording employment whilst gaining experience for certification.

PSL/30 - RECORD OF PRE-CERTIFICATION EXPERIENCE SHEET ____ OF ____

Candidate's name: _____ PCN number (if known): _____

Home address: _____ Post code: _____

Telephone number: _____ Email: _____

NDT Method or Inspection Method	NDT Technique or Inspection Technique	Description of component, material and/or structure tested	Details of application, procedure, code or standard	Experience gained		Signature, name and contact e-mail or telephone number of certificated supervisor (you must include a copy of the relevant certificates of the supervisor signing below refer to *NOTE)
				from	to	
						Name of supervisor: Position in Company: Contact Email: Tel: Signature:

***NOTE: The Supervisors' certificate(s) must be verified as the same level, sector and method and must be valid at the time the experience was gained. [NB: This may include certification schemes other than ISO 9712, such as EN 4179 and SNT-TC-1A providing that this certification has been gained using external training/examination support provided by a BINDT approved organisation. The organisation must be a BINDT approved ATO, AQB and/or OA status.**

Please contact pcn@bindt.org if clarification on this is required. THIS NOTE DOES NOT APPLY TO WELD INSPECTION RECERTIFICATIONS/RENEWALS.

VISION REQUIREMENTS (PSL/44 – issue 15 dated 1st October)

All PCN candidates and holders of PCN certification shall have natural or corrected vision satisfying the following minimum requirement:

PCN will recognise the Tumbling E Chart as a satisfactory near vision test please refer to NANDTB 24. (Existing documentation or Tumbling E vision test charts that continue to state NANDTB/24 remain valid but ISO 18490:2015 is the standard that must be adhered to.)

The candidate shall provide documented evidence of satisfactory vision in accordance with the following requirements:

- A. Corrected or uncorrected near-vision acuity shall permit reading **a minimum of Times Roman N4.5 or equivalent letters** (having a vertical height of not more than 1.6 mm – see note 1) at not less than 30 cm.
- B. Colour vision (see note 2) shall be sufficient that the candidate can distinguish contrast between the colours or shades used in the NDT method concerned as specified by the employer.

Subsequently to certification, the tests of visual acuity shall be carried out at least annually. Records of tests shall be retained by the employer or responsible agency and provided to PCN upon request. Failure to do so will invalidate all PCN certification.

NOTE 1. Laminated hand held vision test charts are available from a number of suppliers, including the Institute of Optometry*. Further information may be obtained from the Certification Services Division of the British Institute of NDT.
*<http://www.ioosales.co.uk/html/practice/eye06B.html>

NOTE 2. All candidates and holders of PCN certification will be required to have had colour perception assessed by the Ishihara 24 plate test. The test is required every five years. **In the event that a colour perception deficiency, indicated by misreading any of the first 17 plates, is detected during the Ishihara test, a further 'trade test' is to be carried out by the employer to ascertain whether the detected colour perception deficiency affects the individual's ability to perform the NDT for which he is certificated.** This trade test is to be documented and the record of the test made available to BINDT upon request.

In such cases as a new medical issue arises candidates are required to undergo further eye examinations as some medical conditions such as diabetes or a major medical condition can affect both near vision and colour perception.

Forms overleaf may be used to record the results of near vision, colour perception and contrast tests.

BINDT accepts that a *nominated official of an Authorised Qualifying Body, a PCN Level 3 certificate holder **or other medical professional**, having documented proof of satisfactory training in the administration of the test, **and** is medically recognised as competent to conduct such tests for candidates and holders of PCN certification.

**nominated officials must provide proof of appropriate training upon request by BINDT.*

RECORD OF VISION TESTS

Name of individual tested: _____ PCN number: _____

Address: _____

Telephone: _____ Email: _____

Employer: _____

RESULT OF ISHIHARA COLOUR VISION TEST Record the Ishihara test results, and indicate if an alternative (trade) test is suggested.			
Please state number of Ishihara plates correctly interpreted: Failure to record this will result in vision test being rejected (MINIMUM OF FIRST 17)	Record of Ishihara plates failed (the test administrator may, optionally, provide comment on the nature of colour perception deficiency):		
RESULT OF COLOUR VISION TRADE TEST (WHERE NECESSARY - SEE NOTE 2) The employer should state the NDT methods and associated colours used by the employee:			
NDT METHOD	ASSOCIATED COLOURS	COLOUR DIFFERENTIATION	CONTRAST DETECTION
RESULT OF NEAR VISION TEST (record the smallest text capable of being read).			
CORRECTED		UNCORRECTED	
Times Roman N: _____, or Jaeger number: _____		Times Roman N: _____, or Jaeger number: _____	
RESULT OF NEAR VISION TEST – Tumbling E Option (candidates should correctly identify 5 out of 5 on each line, and lines 1-9)			
CORRECTED		UNCORRECTED	
Line: _____ Pass/Fail		Line: _____ Pass/Fail	
DETAILS OF PERSON CARRYING OUT AND RECORDING ANY OF THE ABOVE TESTS			
Signature:		Name of tester:	
		Date of test:	
Organisation and telephone number (please use official stamp if available):			