

REQUEST NUMBER

WELDER QUALIFICATION TEST REQUEST

To be completed by the Fabricator or Contractor prior to Qualification testing.
Naming Convention: 0571 MDOT ID-JN MMDDYY Welder Qualification Request.pdf

FABRICATOR	DATE
QC MANAGER	MDOT ID
BASE METAL SPECIFICATION	JOB NUMBER
QUALIFICATION CODE (D1.1/D1.5/D1.2, etc.)	DATE REQUESTED

WELDER QUALIFICATIONS REQUESTED

WELDER NAME	WELDER ID	TEST TYPE	PROCESS	POSITION	STATUS *

COMMENTS

FORM INSTRUCTIONS

- 1) Complete this form and save as PDF file.
- 2) Save this form as follow: 0571 MDOT ID-JN MMDDYY Welder Qualification Request.pdf.
- 3) Attach all AWS qualification supporting documents (welder performance qualification records, test WPS, and welder continuity records) for MDOT's review prior to testing. Submit form and supporting documents to MDOT-StructuralFabrication @ Michigan.gov

* STATUS options:
Initial: First time testing for that process and position.
Retest: A qualification test due to failure of an initial test.
Renewal: A qualification test due to expiration of a previous qualification.