Certified Welding Educator Renewal Program Package

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CWE Renewal Program Information

In order to renew your CWE certification, you must complete the **CWE Renewal Application** to the Certification Business Unit before your expiration date. Your CWE certification will automatically expire if your application is received after the expiration date.

Written documentation from your teaching supervisor attesting that you have been an active CWE for at least (2) years of the last (4) years in the field(s) of welding education, production, construction, inspection or repair must accompany the application. Details regarding the validity of this experience are described in Section 5.2 in the QC5-91 *AWS Standard for Certification of Welding Educators*. Additionally, the application must be signed, stamped and/or sealed by a Notary Public.

Please refer to the **AWS Price List** for all applicable fees. If you are a member of the S.E.N.S.E. Program, please be sure to fill out this section, which is located in the upper left hand corner of the application, in order to receive any applicable discounts. Also, complete the Method of Payment section on the application. All checks and money orders should be made payable to AWS. Payment must accompany your application. **NO RENEWAL INFORMATION WILL BE MAILED UNTIL PAYMENT HAS BEEN FULLY SATISFIED.**

The standard application processing time is (6) weeks. Please be advised that you will be notified (6) weeks after your application has been submitted. Contacting the AWS Certification Business Unit before the (6) week period will delay the application processing time and further hinder the receipt of your certification materials. We strongly urge applicants to please allow the (6) weeks processing time so that we at AWS may efficiently and accurately serve your certification needs. Applications CANNOT be faxed in so please be prompt in submitting your application.

If there are any questions or concerns regarding the CWE renewal process, please feel free to contact the AWS Certification Business Unit at: 1-800-443-9353, ext. #273. Our Certification Coordinators are available to assist you Monday through Friday from 8:00 am to 5:00 pm.
1. PLEASE CHECK ONE OF THE FOLLOWING:

☐ CWE (new applicant)*
☐ CWE Renewal**

If New Applicant, CWI or CAWI #: _________________________
If Renewing, CWE #:____________________________________
Expiration Date:____________________________________
AWS Member #:____________________________________

Are you employed by an AWS S.E.N.S.E. program participating organization?  ☐ Yes  ☐ No
If yes, the Facility name: __________________________

NOTE:
* For CWE new applicants, you must have passed parts A and B of the CWI exam, have the CWE welding instructor credentials form completed by your teaching supervisor and provide proof of welding certifications you have earned.
** For CWE renewal applicants, you must complete the application and have the CWE welding instructor credentials form completed by your teaching supervisor.

2. PLEASE PROVIDE THE FOLLOWING INFORMATION:

MAILING ADDRESS

ADDRESS CONT’D

APT NO.

CITY AND STATE / PROVINCE / COUNTRY

ZIP CODE

HOME TELEPHONE NUMBER

WORK TELEPHONE

FAX TELEPHONE NUMBER

E-MAIL ADDRESS

3. TESTIMONIAL: (this section must be notarized)

I hereby certify I have read the requirements contained in the QC-5 Standard for AWS Certification of Welding Educators. Further, I agree to comply with the existing requirements and any subsequent requirements that may be instituted by AWS. I certify the information I have included on this application is true. I understand any false statements will nullify this application. I give AWS permission to verify this information. I agree to comply with the provisions set forth in the Standard concerning the administration of my examination and certification. Upon obtaining my certification, I give AWS the right to reveal my certification status as it relates to my validity and expiration date only. I further understand any information that is incomplete or missing will place my application on a conditional basis. Therefore, test results will not be released until all obligations are fulfilled.

Applicant’s Signature ___________________________________________________ Date: _______________________________

THE FOLLOWING IS TO BE COMPLETED BY THE NOTARY PUBLIC

Sworn to and subscribed before me this _______ day of ___________________ 20____.
My commission expires ________________ Notary Public Signature _________________________________
(seal and/or stamp is REQUIRED)
CWE WELDING
INSTRUCTOR CREDENTIALS

CWE APPLICANTS: PLEASE HAVE THIS FORM COMPLETED BY YOUR TEACHING SUPERVISOR OR PERSONNEL MANAGER WHICH MAY BE
SUBSTITUTED WITH A WRITTEN VERIFICATION LETTER SIGNED. ALSO, A COPY OF A VALID AWS CERTIFIED WELDER ID/CERTIFICATION CARD OR ITS
EQUAL, OR SHALL PASS A VALID AWS CERTIFIED WELDER TEST, FOR THE WELDING PROCESS TO BE TAUGHT MUST ACCOMPANY THIS FORM FOR NEW
CWE APPLICANTS.

Name of Applicant: __________________________________________________

CHECK: ☐ University ☐ 4-YR College ☐ 2-YR College ☐ Vo-Tech ☐ High School ☐ Private or Union ☐ Company

Institution Name: ___________________________________________________

Institution Address: _________________________________________________

City: __________________________ ST/Prov.: ______________ Zip: _____________ Country: __________

A. STATEMENT OF INSTRUCTIONAL METHODS REQUIRED AT THIS INSTITUTION
List the subjects/processes that you teach at your institution/company. For each subject/process, provide information on the duration of
training and how much time is spent between classroom and laboratory. Describe how students in your courses are evaluated and what
documentation is furnished to track the completion of instruction at your institution. Also describe how you as an instructor are
evaluated.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

B. CONFIRMATION OF INSTRUCTIONAL METHOD DELIVERY
The applicant’s administrator, direct supervisor or personnel manager shall provide a brief statement attesting to the accuracy of the above
description of the applicant’s performance as a welding educator, followed by a formal recommendation for certification as an AWS
Certified Welding Educator.

**NOTE: SELF-EMPLOYED OR CONTRACT APPLICANTS, IN LIEU OF THIS SECTION, MUST PROVIDE TWO LETTERS OF
REFERENCE ON COMPANY LETTERHEAD FROM SEPARATE CLIENTS, ATTESTING TO THE NATURE OF WORK
ASSIGNMENTS DURING THE PERIOD OF PERFORMANCE. IF THE EMPLOYER IS NO LONGER IN BUSINESS, PLEASE
INCLUDE A COPY OF THE W2 FORM.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I recommend that ________________________________________ be recognized for certification as an AWS Certified Welding Educator.

NAME (PRINT)__________________________________________ SIGNATURE_______________________________________________

TITLE________________________________________________ DATE______________________________________

CWE Credential 04.27.2009