

RECOGNIZED TEST ADMINISTRATOR APPLICATION

Payment Card Industry Data Security Standards prevent the use of credit card information sent through email or fax. A Client Service Representative will contact you within three business days to complete any payment process required.

Note: Any personal information collected is handled in accordance with the British Columbia *Freedom and Protection of Privacy Act*. If you have questions about the collection, use, or disclosure of this information, contact the Records, Information and Privacy Analyst for Technical Safety BC at 1 866 566 7233.

A. Application Type (Please select one option)

<input type="checkbox"/> This is a NEW application	<input type="checkbox"/> This is a RENEWAL application Please provide the Registration Number: _____
Your NEW application package must include: <ol style="list-style-type: none"> 1. Completed and signed "Recognized Test Administrator Application" form (FRM-1383) 2. Completed "QC Manual Review Checklist for the Administration of Welding Performance Qualification Tests" (MAN-4017) 3. Quality Control Manual <p>Fee of a minimum of 5 hours at safety services hourly rate. Time in excess of minimum will be invoiced. Please see the fee schedule for the safety services hourly rate.</p>	Your RENEWAL application package must include: <ol style="list-style-type: none"> 1. Completed and signed "Recognized Test Administrator Application" form (FRM-1383) 2. Fee of a minimum of 1 hour at safety services hourly rate. Time in excess of minimum will be invoiced. Please see the fee schedule for the safety services hourly rate.

B. Applicant Information

Company Name:	
Company Address:	
Mailing Address: (If different from above)	
Business Phone:	Mobile:
Email:	Contact Preference: <input type="checkbox"/> Mail <input type="checkbox"/> Email
Owner/ Contact Name:	Owner/ Contact Title:
Owner/ Contact Phone:	Owner/Contact Email:
BC Business Registration #:	WorkSafe BC Registration #:
Scope of recognition requested. Please select all that apply. <input type="checkbox"/> Administering performance qualification tests to individuals under your employment only <input type="checkbox"/> Administering performance qualification tests to any individual	Types of Performance qualification tests: <input type="checkbox"/> Registered procedures <input type="checkbox"/> Standardized practical exams for Class IT <input type="checkbox"/> Practical exams for Class R <input type="checkbox"/> Standardized practical exams for Class A certificate of qualification renewal
Quality Control Manual Name/Version:	Effective Date:

C. Declaration

I have read and understand my duties, responsibilities and obligations as a Recognized Test Administrator under the <i>Safety Standards Act</i> and Regulations.	
<input type="checkbox"/> Checking this box and submitting this form to Technical Safety BC via email constitutes your authorization. This has the same effect as submitting a handwritten signature.	
Owner/ Contact Signature:	Date: