



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.



American Welding Society

550 NW LeJeune Rd Miami, FL 33126
(800) 443-9353 or (305) 443-9353, ext. 273

FAXED OR EMAILED APPLICATIONS ARE NOT ACCEPTED

**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 _____