

**ATTACHMENT 2
INSPECTOR CERTIFICATION**

Employee: _____ Z# _____ Employer: _____
Test Method: _____ Level: _____

Education, Experience, and Training

Meets the requirements of Los Alamos National Laboratory NDE Certification Program as outlined in
ESM, Chapter 13, Volume 1, GWS 1-11, Attachment 3 and the requirements of SNT-TC-1A -2006 or later in
the applicable test methods.

General
Specific
Practical
Composite

Date of: _____ Expiration Date: _____

ASNT Level III: _____ ASNT Expiration: _____
AWS Certificate: _____

Remarks:

NDE Level III: _____ Date: _____

LANL Welding Program Admin.: _____ Date: _____