

**SKILLSUSA PENNSYLVANIA
PROOF OF TRAINING FORM
Welding Competition**

Note: Failure to complete this form will disqualify the contestant from the competition. A copy must be given to the Contest Chairperson on the day of competition.

Contestant Name: _____

Check one: ___Secondary ___Postsecondary _____School

This is to certify that the above named contestant has received training and is competent in the safety and operation of the following equipment and or tools. Contestants will be permitted to use only those tools and or equipment that have been checked by the instructor.

___Shielded Metal Arc Welder

___Gas Metal Arc Welder

___Fluxed Cored Arc Welder

___Gas Tungsten Arc Welder

___OFC Equipment

___Plasma Arc Cutter

___Carbon Arc cutting/gouging

___Portable grinder

___Compressed and flammable gases

___Hand tools as listed in the SKILLSUSA Championships Technical Standards

Instructor's signature

Print name of instructor

Date_____

Contestant's signature

Print name of contestant

Date_____

Reviewed and Approved by: _____

Director/Administrator

Date

One copy should be placed in the contestant's competition/name badge.