

6. Current Employment Details:			
Employer's Name			
Address			
PIN Code		Telephone No.	
Email Address			
Applicant's Department			
Applicant's job Description			
Current Supervisor details (with Mobile no)			

7. Details of Employment in the field of Radiography Testing (Covering Last Five Years with documentary evidence, attach experience certificate/s):					
Sr. No.	Duration of Employment		Employer's Name & Address (Including Telephone & Fax No.)	Certificate holder's Department & name of Supervisor	Certificate Holder's Job Description
	From	To			
1					
2					
3					
4					
5					

Attach additional sheets if required.

I declare that the information provided in this application form and in the supporting documents are correct. I understand that in case of any wrong information or canvassing, the application or the renewed/ revalidated certificate may be cancelled.

Date: _____ Place: _____ Signature of the Candidate _____

I confirm that the information provided in sections 1 to 7 hereinabove of this application and in the supporting documents is, true and verifiable to the best of my knowledge. Work performed by the applicant named in section 6 has been satisfactory and without significant interruption while employed in this company/organisation. It is also certified that no action has been taken/initiated against him for dereliction in duty in Radiography Testing related activities. The candidate is also physically and mentally in a sound state.

Date:

Place:

Signature of the Employer with seal

Check List

Mark 'X'

1. Duly filled Application Form for renewal-----
2. Original BARC RT L-2 Certificate (only Statement of Marks) -----
3. Work Experience Certificate/s -----
4. Certificate/s of Additional Qualification-----
5. Copy of Aadhaar Card-----
6. Eye fitness certificate as per the Annexure -1 -----
7. Self addressed, good quality envelope (size: 32 cm X 26 cm).-----

Note: No fee is charged for revalidation

Note: The duly filled-in Application Form with all attachments and Annexure- I should reach preferentially at least six months before the expiry date the certificate

Communication Address:

**Officer-in-Charge (BARC RT-2 Training Programme)
Industrial Tomography and Instrumentation Section
HIRUP, Bhabha Atomic Research Centre (BARC)
Trombay, Mumbai-400085**

Tel: 022-25595512 (Office)

Email: itisoff@barc.gov.in

Annexure – I

EYE EXAMINATION REPORT – NDT PERSONNEL

Application for Renewal / Revalidation of BARC Radiography Testing Level – II Certificate

Name of the Candidate as per Radiography Testing Level – II Certificate:

Radiography Testing Level – II Certificate No.: _____

Vision Requirements:

Near Vision and Colour Vision – The candidate shall provide documented evidence of satisfactory vision as determined by a medical person or the employer.

(A) Near vision acuity: Near vision acuity shall permit reading a minimum of Jaeger Number '2 or equivalent type and size letters at a distance of not less than 30 cm on a standard Jaeger test chart with one or both eyes, either corrected or uncorrected;

I CONFIRM THAT THE CANDIDATE:

(Please check- only one)

- meets the requirement without corrections.
- meets the requirement with correction.
- does not meet the requirement.

(B) Colour Vision: Colour vision shall be sufficient that the candidate can distinguish and differentiate between the colours used in the NDT method concerned. Colour vision to be tested as per ISHIHARAS charts.

Specific remarks by the eye Examiner: _____

Name & Signature of Eye Examiner with seal

Date: