BRAZING EXAMINATION RECORD

SECTION I - EMPLOYEE INFORMATION

1. NAME	2. A-STAMP OR SHOP NO.	3. DATE
4. BRAZING PROCESS	5. ☐ BRAZER ☐ OPERATOR	6. BPS NUMBER

SECTION II - TEST BRAZEMENT

1. BASE METAL ID	2. BM NUMBER
3. FILLER METAL ID	4. FM NUMBER
5. TEST POSITION	

SECTION III - TEST RESULTS

1. VISUAL	2. PASS	3. FAIL

SECTION IV - MACROETCH

1. SPECIMEN NO.	2. REMARKS	3. N/A	4. PASS	5. FAIL

SECTION V - QUALIFIED FOR

1. BRAZING PROCESS	2. BM NUMBER
3. POSITION	4. FM NUMBER
5. QUALIFIER SIGNATURE	6. DATE

All fields required.
Complete all required fields and mark unused optional fields with N/A.

PRINT