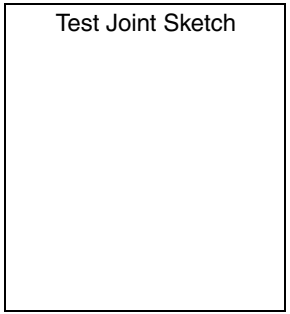


**SAMPLE PERFORMANCE QUALIFICATION TEST RECORD**  
(SMAW, GMAW, GTAW, FCAW, SAW, OFW, PAW)

Name \_\_\_\_\_ Welder  Welding Operator   
 ID No. \_\_\_\_\_ WPS Used \_\_\_\_\_  
 Process(es) \_\_\_\_\_ Transfer Mode (GMAW) \_\_\_\_\_  
 Test Base Metal Specification \_\_\_\_\_ To \_\_\_\_\_  
 Material Number \_\_\_\_\_ To \_\_\_\_\_  
 Fuel Gas (OFW) \_\_\_\_\_  
 AWS Filler Metal Classification(s) \_\_\_\_\_ F No. \_\_\_\_\_  
 Backing: Yes  No  Double Side  Single Side   
 Current/Polarity: AC  DCEP  DCEN   
 Consumable Insert: Yes  No  Backing Gas: Yes  No

<b>Test Weldment</b>	<b>Position Tested</b>	<b>Weldment Thickness (T)</b>
Groove: Pipe	1G 2G 5G 6G	Thickness _____ Diameter _____
Plate	1G 2G 3G 4G	Thickness _____
Fillet: Pipe	1F 2F 2FR 4F 5F	Thickness _____ Diameter _____
Plate	1F 2F 3F 4F	Thickness _____
Cladding:	1C 2C 3C 4C 5C 6C	Thickness _____
Hardfacing:	1C 2C 3C 4C 5C 6C	Thickness _____
Progression:	Vertical Up <input type="checkbox"/> Vertical Down <input type="checkbox"/>	



**Test Results**

Visual Test: Pass  Fail  N/A   
 Bend Test: Pass  Fail  N/A   
 Macro Test: Pass  Fail  N/A   
 Break Test: Pass  Fail  N/A   
 Radiographic Test: Pass  Fail  N/A

Remarks \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Qualification Limits**

Process(es) \_\_\_\_\_

<b>Weldment</b>	<b>Position</b>	<b>Deposit Thickness</b>
Groove: Pipe	F H V O All	t min. _____ t max. _____ Dia. min. _____
Plate	F H V O All	t min. _____ t max. _____
Cladding:	F H V O All	t min. _____ t max. _____
Hardfacing:	F H V O All	t min. _____ t max. _____
Fillet: Pipe	F H V O All	<b>Base Metal Thickness</b> T min. _____ T max. _____ Dia. min. _____
Plate	F H V O All	T min. _____ T max. _____
Progression:	Vertical Up <input type="checkbox"/> Vertical Down <input type="checkbox"/>	
Base Metal M No(s). _____	Fuel Gas (OFW) _____	
Filler Metal F No(s). _____	Backing: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Current/Polarity: AC <input type="checkbox"/> DCEP <input type="checkbox"/> DCEN <input type="checkbox"/>	Consumable Insert: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Backing Gas _____	Transfer Mode (GMAW) _____	

I certify that the statements in this record are correct and the test welds were prepared, welded, and tested in accordance with the requirements of AWS B2.1/B2.1M, (\_\_\_\_\_), *Specification for Welding Procedure and Performance Qualification*.  
(year)

Date Tested \_\_\_\_\_ Qualifier Signature \_\_\_\_\_

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**Figure F.1—Example of a Performance Qualification Test Record**