



# PSL 57A ISSUE 19 DATED 5 February 2025 IMPLEMENTATION 1<sup>st</sup> March 2025

APPLICATION OF <u>INITIAL</u> examination COMPLETED APPLICATIONS MUST BE SUBMITTED DIRECTLY TO THE AQB (PSL4) DO NOT SEND TO BINDT

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# **CP27 CODE OF ETHICS**

It is a condition of PCN certification that certificate holders are expected, as a minimum to understand, acknowledge and abide by the CP27 code of ethics and the principles contained herein. It is a requirement that all PCN applicants and certificate holders acknowledge, by signature, that they have read, understood and acknowledge this code of ethics and agree to abide by them at all times whilst engaged in PCN certified NDT and/or CM activities. <a href="https://www.bindt.org/downloads/CP27.pdf">https://www.bindt.org/downloads/CP27.pdf</a>

# PRESSURE EQUIPMENT DIRECTIVE 2014/68/EU

- As of 1st May 2021, examinations for those sector/methods eligible for PED recognition (see below table 1) will include a charge of £48.00 plus VAT, this will be charged as a PCN PED administration fee.
- The AQB shall implement this charge in addition to the PCN administration fee for relevant examinations (see below **table 1**).
- PCN holders will receive automatic recognition to the Pressure Equipment Directive and be visible on the LRQA-CASL verification page <a href="https://www.inspectioncasl.com/verify-bindt-certification/">https://www.inspectioncasl.com/verify-bindt-certification/</a>. They will be issued with a certificate showing compliance with PED.
- Approval will continue until the certificate has expired.

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Sectors	Methods
2 Pre and in-service	20 Eddy Current
6 Welds	21 Magnetic Particle Testing
	22 Liquid Penetrant Testing
	23 Visual testing
	24 Ultrasonic Testing
	25 Radiography
	27 TOFD
	28 Phased Array
	29 Computer Radiographic Testing
	34 Radiographic Interpreter
	35 Computer Radiographic Interpreter

# **GENERAL INFORMATION (please read carefully before completing application).**

This form is to be used for candidates for initial examination in any PCN designated NDT method and industry or product sector. Form PSL/57B is to be used for recertification and supplementary examinations, or a retest of previously failed initial examinations.

All candidates for PCN examination and certification are required to fulfill the conditions for eligibility specified in the current edition of the PCN General Requirements for Certification of NDT Personnel.

Eligibility is defined in terms of visual acuity and colour perception, training, and experience. Attention is drawn to opportunities for mature candidates who may satisfy special eligibility criteria (PCN General Requirements refer). Candidates will be required to supply verifiable evidence of satisfying all eligibility criteria and PCN publishes the following documents, all of which are available free of charge, for use in recording and providing such information in an acceptable format.

Candidates shall supply, to the AQB, verifiable evidence of satisfying all eligibility criteria i.e. valid visual acuity and experience prior to booking an examination, in the event that BINDT discovers that the required evidence of eligibility is not submitted, any examination results or certification awarded will be null and void.

PSL/30 mandatory form for recording certification experience <u>See Part 5</u>PSL/44 PCN Vision Requirements, including optional form for recording results of tests

Initial enquiries for examination appointments should be made to the PCN Test Centre by telephone. However, no examination appointment can be considered confirmed until a correctly completed application form and supporting information has been received. Applications should be legibly completed.

Once completed, this form and supporting information should be sent to the PCN AQB together with relevant payment information or examination fees. One application form is to be submitted in respect of each examination applied for. Candidates not already having a PCN identity card will need to provide one passport photograph on the day of examination. Please enquire beforehand whether photographic facilities are available at the examination centre.

Applications dependent upon the individual holding (or having held) appropriate certification must be supported by acceptable evidence of such certification. If a photocopy is attached to this application as evidence, the candidate will be required to show the original on the day of the examination.

Where marks from earlier examinations are to be included in the weighted composite grade, the candidate should supply the relevant examination result notice (or, where unavailable, verifiable information from which the date and scope of the examination and the PCN Test Centre where the examination took place can be ascertained). Failure to comply with this requirement may result in a refusal to examine.

#### Applications shall only be completed by the candidate seeking PCN certification.

If uncertain of the requirements for this application, please consult the Test Centre or PCN before proceeding.

Table 1

# PCN INTRODUCES ELECTRONIC CERTIFICATES

PCN is transitioning to e-certification, whereby certificates are to be issued electronically, so that PCN certificate holders can view and print their certificates from their laptop or mobile device. To be eligible for e-certification, the PCN holder must ensure PCN has an up-to-date electronic copy of their photo (taken within the past 10 years), a signature and valid PERSONAL email address.

# **APPLICATION FORM**

## PART 1. CANDIDATE'S PERSONAL DETAILS - ALL PARTS ARE MANDATORY

Family name:			Given names:		
	e's usual residence, includir s address will be shown on t	- · ·			
PCN cert	including postcode/zip code ificate, when issued, is to be re issued).				
	AL email address e of e-certificate):				
AUTHOR	ATE'S SIGNATURE ISING CERTIFICATE TO BE ABOVE ADDRESS:				
	ne number including area ernational dial code:			PCN number:	
Gender (	optional):			Date of birth (dd/mm/yyyy):	
-	e possible to make provision to the attention of the exam		ns for candic	lates with special requir	ements, please bring

PART 2. CURRENT EMPLOYMENT DETAILS	
Employer's name and address (including telephone number, email address and post code):	
Candidate's position in the organisation:	
Employment status (employed or self employed):	

### PART 3. PRE-CERTIFICATION TRAINING

Attach evidence of satisfactory completion of PCN approved training course or provide the following details for classroom training;

Name of training organisation and title/reference of relevant training course:	
Dates of course (from/to):	

#### PART 4. EXAMINATION APPLIED FOR (must be completed - check availability with the Test Centre before completing)

Products or industry sector in wh sought (castings, welds, forgings, & in-service inspection, railway o	wrought prod						
NDT method (tick only ONE NDT method):	ET	MT	PT	RT	RI	UT	VT
	CRT	TOFD	PAUT	Other ple	ase state:	1	
Level (tick one box). note: RI is level 2 only	1	2	3				
If level 3, state which exam part(s);							
Sector/methods applicable to PE	D recognition	n and admini	stration cha	rge			
2 Pre and in-service 6 Welds	20 Eddy Current 21 Magnetic Particle Testing 22 Liquid Penetrant Testing 23 Visual testing 24 Ultrasonic Testing 25 Radiography 27 TOFD 28 Phased Array 29 Computer Radiographic Testing 34 Radiographic Interpreter 35 Computer Radiographic Interpreter						
Radiation safety (tick only one box, and ignore sector, NDT method, level and categories)		Basic radia	tion safety		Advanced R	adiation Saf	ety
State the categories of certification that you seek to attain (see relevant appendix to PCN/GEN). Note: that there may be limitations upon the number of categories that may be attempted at anyone sitting - consult PCN or the Test Centre for further advice. Preferred examination date and venue:		umber of tting -					
venue.							

#### PART 5. PRE-CERTIFICATION EXPERIENCE

Experience is not an essential pre-requisite for level 1 and 2 examinations only. However, if such evidence is available at the time of examination, and it is a **mandatory** requirement that this be provided direct to the AQB on the PSL 30 Attached.

**Industrial NDT Experience** – the experience needed to acquire the skill and knowledge to fulfil the provisions of qualification in the appropriate sector, and which is gained under the supervision of Appropriately Qualified Personnel, in the application of the NDT method in the sector concerned.

**Qualified supervision** – supervision of candidates gaining experience by NDT personnel certificated under the PCN Scheme or by non-certificated personnel who, in the opinion of BINDT, possess the knowledge, skill, training and experience required to properly perform such supervision.

**Appropriately Qualified Personnel** – Individuals carrying out supervision of candidates for PCN certification holding relevant certification issued by a BINDT recognised certification body meeting the requirements of ISO/IEC 17024.

**NOTE**: The Supervisors' certificate(s) <u>must</u> be verified as the same level, sector and method and must be valid at the time the experience was gained.

This may include certification schemes other than ISO 9712, such as EN 4179 and SNT-TC-1A providing that this certification has been gained using external training/examination support provided by a BINDT approved organisation. The organisation must be a BINDT approved ATO, AQB and/or OA status. Please contact <u>pcn@bindt.org</u> if clarification on this is required.

Experience may be gained following <u>level 1 and 2</u> examinations only and recorded on Form PSL/30. Once evidence of experience satisfying the above definitions has been accumulated, it is provided direct to PCN, together with an application for certification using form PSL/57C. Level 3 candidates – <u>must</u> have the required amount of NDT experience prior to taking any examination.

Claimed duration of experience supervision (enter number of PSL 30 to be completed with o		
Name, address and telephone number or email address of person who can verify experience claimed:		

#### PART 6. CANDIDATE'S STATEMENT CONFIRMING ELIGIBILITY FOR EXAMINATION

CANDIDATE'S FULL NAME	
(this will be shown on the certificate):	
PCN NUMBER (if existing PCN certificate	
holder):	

I have read and understand PCN General Requirements for the certification of personnel engaged in NDT, particularly the criteria for eligibility, and hereby confirm that I satisfy those criteria covering vision, training and experience applicable to the level and NDT method for which I am seeking certification. In the event that I should be awarded PCN certification. I agree to comply with the PCN Code of Ethics (published as PCN document **CP27**).

I understand that, in the event of a false statement being discovered, any certification awarded as a result of the examination will be null and void. I accept responsibility for payment of examination fees in the event of non-payment by the sponsor.

SIGNATURE:	
DATE:	

#### Attach

- a. Evidence of vision test (PCN PSL/44 may be used) unless vision test arranged at Test Centre
- b. Evidence of training
- c. Evidence of experience (PCN document PSL/30)
- d. Correct examination fee (unless part 6 of this form is appropriately completed); details of fees are available from the test or examination centre.

#### Bring

- e. Your PCN record of certification
- f. Your own NDT instrument if desired (information on acceptable instruments is available from the Test Centre), together with a valid calibration certificate.

#### PART 7. VERIFICATION OF CANDIDATE'S STATEMENT BY THE SPONSOR, EMPLOYER OR, IF THE CANDIDATE IS SELF-EMPLOYED, A REFEREE.

To the best of my belief, the candidate's statement given above is correct at the time of signing.

NAME:	
SIGNATURE:	
COMPANY:	
EMAIL ADDRESS:	

# **GENERAL DATA PROTECTION REGULATION (GDPR) –**

BINDT will store and use the information given on this form only for the purpose for which it has been provided. Your personal details and any other data you provide to BINDT will not be passed on to a third-party without your permission.

BINDT would like to contact you from time to time to let you know about its other services that may be of interest, such as special offers and discounts, events and new products. If you are happy to be contacted by BINDT, please indicate by ticking the box below:



I AM HAPPY FOR BINDT TO CONTACT ME WITH INFORMATION THAT MAY BE OF INTEREST

You can subscribe or unsubscribe at any time, simply let us know.

#### PART 8. FOR OPTIONAL USE BY THE TEST CENTRE

EXAMINATION DATE:	
EXAMINATION VENUE:	
EXAMINER:	
MODERATOR:	
PAYMENT RECEIVED:	
RESULT REFERENCE:	
EXAMINATION FILE COMPLETE AND CLOSED	
(initials/date):	
REMARKS	
(if any verification sought and obtained, record details	
below or on a separate page and keep with candidate	
exam pack):	

# Summary of changes

Issue	Issue date	Summary of changes
14	01.04.2018	GDPR included
15	01.07.2018	<ul> <li>GDPR statement moved to start of application</li> <li>Removed sentence (CP16 Annex D1 should be used to record past employment.) from Part 2.</li> <li>Contents section added</li> </ul>
16	01.07.2020	Clauses 7a and 7e changed to reflect current process
17	01.04.2021	Updated to include new PED requirements
18	01.01.2022	Updated to incorporate e-certification eligibility
19	05.02.2025	Removal of part 9 payment page