

ESA Course Application Form – Operator & Inspector

The purpose of this form is to assess a candidate's suitability prior to completion of a Booking Form.

Name _____ Position _____
 Department _____ Company _____
 Address _____ Telephone _____
 _____ Email _____

ESA Course applied for			
Please enter "C" for certification or "R" for re-certification, as required	Operator Cat 3	Inspector Cat 2	For any re-certifications: ESA Centre in which the first certificate was awarded
ECSS-Q-ST-70-61			
ECSS-Q-ST-70-18			
ECSS-Q-ST-70-28			
ECSS-Q-ST-70-26			
ECSS-Q-ST-70-30			

If you are only Re-certifying in the subjects already held, please skip the next step .

If available, please provide the previous certificate number:

If applying for any first time Certification, please enter details of your experience as an Operator or an Inspector. **Certification courses require a minimum of 2 years of relevant experience. Experience only counts if your role requires daily involvement with the respective activities.** Please enter the number of years of experience in the corresponding box(es) below.

Experience	Operator	Inspector
THT Solder assembly		
SMT Solder assembly		
RF Cables		
Crimping		
Wiring		

It is the responsibility of the employer to train and qualify their personnel prior to proposing their application for an ESA certification. Acceptance on, and attendance of, an ESA approved course does not guarantee that the participant will be ESA certified by the end of the course. ESA certification is granted on exceeding the minimum workmanship standards and minimum pass criteria for the theoretical examination for each subject and category applied for. The employer is responsible for and shall hold a valid Visual Acuity record for the applicant.

Signatures: _____ (Applicant) _____ (Applicant's Manager)
 Date: _____ (Manager's printed name)