

ASME

Geometric Dimensioning and Tolerancing Professionals (GDTP) Application for Senior Level Certification

Instructions

- Review Applicant Information brochure.
- Complete the application.
- Page four of this application outlines payment and submission options. Please follow the instructions based on the option you select.
- Send completed application to ASME at least 30 days prior to the date you wish to take the examination.

Mailing address:

Mr.
Ms.

_____ (last name) _____ (first name)

Address: _____

Address: _____

Address: _____

City: _____ State: _____ Zip code: _____

Country: _____

Home telephone: _____ Work telephone: _____

Fax: _____ email: _____

Order number (for credit card payments): _____

Official List of Certified GDT Professionals:

ASME publishes a list on the ASME web site of those individuals who maintain a valid certification. If the information that you wish to have included on this list is different from your mailing address, provide that information below:

Company: _____

City: _____ State: _____ Country: _____

The applicant named above makes this application to ASME for GDTP Certification. The applicant agrees to follow the Policy on use of the ASME GDTP Symbols and Authorization. The applicant also agrees to return the Certificate if requested by ASME.

Applicant's signature _____ Date _____

In order to obtain Senior Level GDTP Certification, you must document at least five years of experience in both the understanding and application of geometric dimensioning and tolerancing. The experience should include the items in the description below.

- (a) Understanding the meaning of the symbols, modifiers, and relationships of GD&T as applied to engineering drawings and related documentation.
- (b) Making the proper selection with consideration for the function and relationship of part features and of geometric controls, to document the product design intent.
- (c) Performing calculations associated with GD&T.
- (d) Applying the appropriate geometric control symbols, modifiers, and datum references to the engineering drawings and related documentation.
- (e) Applying the principles of GD&T to the operations of manufacturing, quality control, and verification processes associated with the engineering drawings and related documentation.
- (f) Applying the principles of GD&T to the establishment of functional gaging activities.

Please provide a chronological listing of at least five years of your experiences starting with the most recent first. Use additional pages if necessary.

Employer/Company Name: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Country: _____

Supervisor: _____ Phone: _____

Job Title(s):	From:	Mo.	Yr.	To:	Mo.	Yr.
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Duties and responsibilities:

Employer/Company Name: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Country: _____

Supervisor: _____ Phone: _____

Job Title(s): _____ From: _____ Mo. _____ Yr. _____ To: _____ Mo. _____ Yr. _____

Duties and responsibilities:

Employer/Company Name: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Country: _____

Supervisor: _____ Phone: _____

Job Title(s): _____ From: _____ Mo. _____ Yr. _____ To: _____ Mo. _____ Yr. _____

Duties and responsibilities:

The undersigned attests to having achieved five years of experience in both the understanding and application of Geometric Dimensioning and Tolerancing and that the information provided to ASME to document this experience is correct.

I authorize ASME to verify the information contained in this application, and, to that end, to contact any entity named or identified in this application or in any document submitted in support of this application. I hereby consent to and authorize the release and disclosure to ASME of any information records or correspondence as required to verify the information in the application, which is held by any such entity identified in this application.

Applicant's signature: _____ Date: _____

Fees:

The examination fee is \$574. This fee consists of a \$62 non-refundable administrative fee. If a candidate withdraws prior to executing an exam, the unused fees can be refunded.

Methods of payment and submittal:

Credit Card: Complete the application and click here to make an online payment: (product catalog link). After your payment is approved, you will be issued an order number. Please enter your order number on page one where indicated. Save you completed application and submit it to ASME via email, fax or mail.

email: certification@asme.org

fax: 1-212-591-8502

Order number: _____

Check or money order: Complete the application, print, attach check or money order and mail to:

Mail:

ASME Personnel Certification
Processing Department
150 Clove Road, 6th Floor
Little Falls, NJ 07424-2139