

**APPLICATION FOR BOILER AND PRESSURE VESSEL  
INSPECTORS' EXAMINATION**

I hereby make application for a Boiler and Pressure Vessel Inspectors' Examination, and certify that the following statements are correct:

Name in full: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Print or type) mo./day/yr.

Present residence: \_\_\_\_\_  
(Street Address, City/Province, State, Country, Zip Code)

Name and address of employer: \_\_\_\_\_  
(Street Address, City/Province, State, Country, Zip Code)

1. School Education \_\_\_\_\_ Degree \_\_\_\_\_  
(M.E., E.E, C.E., etc)

**2. BOILER SHOP EXPERIENCE**

| Employer's Name | *Period of Employment | Employed as |
|-----------------|-----------------------|-------------|
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |

**3. BOILER INSTALLATION EXPERIENCE**

| Employer's Name | *Period of Employment | Employed as |
|-----------------|-----------------------|-------------|
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |

**4. BOILER OPERATING EXPERIENCE**

| Employer's Name | *Period of Employment | Employed as |
|-----------------|-----------------------|-------------|
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |

**5. BOILER INSPECTION EXPERIENCE**

| Employer's Name | *Period of Employment | Employed as |
|-----------------|-----------------------|-------------|
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |
|                 | From _____ to _____   |             |

\* Give month and year of each period of employment.

6. Jurisdictional and National Board written examination taken in \_\_\_\_\_ Dates \_\_\_\_\_  
(State of United States or Province of Canada)

An exam fee of \$50 should accompany this application. Checks or money orders are to be made payable to the **TREASURER OF VIRGINIA.**

Mail to: **Virginia Department of Labor and Industry**  
 Boiler Safety Compliance Program  
 Main Street Centre Building  
 600 East Main Street, Suite 207  
 Richmond, Virginia 23219

\_\_\_\_\_  
 Signature of Applicant