

## Remote Learning Program (R.L.P) Enrolment Form

*Supplementary to the Course Enrolment Form.*

Student name:	Date of birth:    /    /
---------------	--------------------------

The Remote Learning Program is aimed at technicians employed in the NDT field.

### **RLP INSTRUCTIONS – ALL METHODS**

Candidates must successfully complete all online assessments before enrolling on Stage 2 Classroom Learning dates with a final score of more than 90% on each assignment.

Candidates attending Stage 2 must supply **prior to enrolment:**

- Copies of all fully completed assignments
- Copies of all fully completed knowledge tests
- Copies of all fully completed Maths Worksheets (where applicable)
- A statement from their Level 3, confirming the below method specific requirements (where applicable).

### **METHOD SPECIFIC REQUIREMENTS**

#### **Ultrasonics Level 2**

Prior to attending Stage 2 candidates must have:

- Familiarity with standards AS2207 and AS2083
- Significant practical experience in ultrasonic weld testing and the ability to confidently setup from scratch and calibrate angle probes to determine:
  - Probe index, Velocity, Probe Angle

**This WILL be assessed at the commencement of the course, if you are unable to complete this satisfactorily, you WILL be removed from the course.**

#### **Radiography Level 2**

Prior to attending Stage 2 candidates must have:

- Minimum 1000 hrs of field experience with RT
- Excellent understanding and familiarity with AS2177

**I understand the following conditions of enrolment and acknowledge by my signature:-**

- I understand the Remote Learning Program requirements, as set out above.
- The on-site training component of the Remote Learning Program will be subject to availability of scheduled course.
- On-site training is subject to the scheduled course proceeding. In the unlikely event that this course(s) is cancelled, ATTAR will work with candidates to ensure alternative dates are provided.
- This form is to accompany the Course Enrolment form for the applicable method.

Student Signature:	Date:    /    /
--------------------	-----------------

Please forward your completed form to [training@attar.com.au](mailto:training@attar.com.au)