

**Employer statement on experience for purposes of renewal/re-certification¹
SKNDO**

The undersigned hereby declares that:

Mr. / Mrs :
born on:

in the period from:

(date)

until Present²

(date)

NDT work performed in the examination method/technique, level and sector, for which this application is submitted (see application form):

Method :.....

Level :.....

Sector :.....

The work has been carried out:

☐ without significant interruption.

☐ with one or more interruption(s) totaling: months.

Check what is applicable.

Significant interruption means a continuous period of more than one year or two or more periods with a total time of more than two years in the past 5 years, during which the certificate holder has not performed the NDT work for which he is certified. Statutory vacation time and absences due to illnesses or courses of less than 30 days are not included.

The employer/client¹ declares that the NDT activities listed above can be substantiated with documents and that, at Hobéon SKO's request, he/she will make copies of these available.

In the case of multiple employers/clients, a statement should be submitted for each employer/client.

Signature of employer/client¹:

Date:

Name and function:

Firm:

¹ Strike out what does not apply

² Strike out and enter date if in the past