

**IRONWORKER QUALIFIED INSTRUCTOR CERTIFICATE PROGRAM**  
**APPLICATION**

**Instructions:**

1. Please print all information.
2. Print a copy of your transcript showing course you have taken during the annual instructor training program, and at our regional training centers from the IWATS.
3. Attach a copy of your transcript to this application and return Attention to Elizabeth Harvey:

Email preferred: [eharvey@iwintl.org](mailto:eharvey@iwintl.org)  
Mail: Ironworkers Apprenticeship and Training Department  
Suite 400  
1750 New York Avenue, NW  
Washington, DC 20006

**Required Information (please print):**

Date of Application: \_\_\_\_\_

Candidate Name: \_\_\_\_\_  
(Name to appear on the certificate)

Local: \_\_\_\_\_

Training Center Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip

Training Center Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Coordinator: \_\_\_\_\_

Refer to your transcript in order to complete these sections (please print).

