

**Laser Weld Inspector Qualification Record**

Name (Print Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PCB ID # \_\_\_\_\_\_\_\_\_\_\_

* Write N/A if not applicable to the operator\* Trainer’s

**Technician Checklist:** Initials

Technician has been trained in the dangers of lasers and Yes [ ]  No [ ]  \_\_\_\_\_\_\_

wears protective glasses per TA1003.

Technician has been trained in the importance of cleanliness Yes [ ]  No [ ]  \_\_\_\_\_\_\_

in welding per TA1003 – including the avoidance of hand lotions.

Technician has had 200 hours of having their inspection Yes [ ]  No [ ]  \_\_\_\_\_\_\_

double checked by a qualified inspector.

Technician identifies all weld defects correctly (holes, shield gas Yes [ ]  No [ ]  \_\_\_\_\_\_\_

problems, raised covers, cracks, contamination, etc) per QA102

Technician performs the connector pull test per TA1003 properly Yes [ ]  No [ ]  \_\_\_\_\_\_\_

Technician leak tests parts per TA1012. Yes [ ]  No [ ]  \_\_\_\_\_\_\_

Technician properly logs defects into the database/RTY. Yes [ ]  No [ ]  \_\_\_\_\_\_\_

Technician fills out TA081 properly and separates non-conforming

parts per TA1003. Yes [ ]  No [ ]  \_\_\_\_\_\_\_

Technician changes argon dewars correctly per TA1256 Yes [ ]  No [ ]  \_\_\_\_\_\_\_

Technician correctly sands the cubes per TA1003. Yes [ ]  No [ ]  \_\_\_\_\_\_\_

Technician passed TA198 Visual Inspection Test with no Yes [ ]  No [ ]  \_\_\_\_\_\_\_

incorrect answers (can re-take as needed).

Approved - Manufacturing Supervisor: **Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_**

Approved – Manufacturing Engineer: **Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_**

Continued Yearly Qualification - Record Year & Hours worked and initial:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |