

Sample Procedure Qualification Record (PQR) Form

Procedure Qualification Record (PQR) No. _____

Contractor _____

Authorized by _____

Revision No. _____

Welder _____

Test Date _____

Welding Process: FCAW-G FCAW-S GMAW SMAW

PQR JOINT TYPE

Direct Butt Indirect Butt T-Joint

Test Assembly: Figure 6.5(A) Figure 6.5(B) Figure 6.5(C) Figure 6.5(D)

Position _____ Groove Type _____ Single Bevel Double Bevel

Root Opening _____ Root Face _____ Groove Angle _____

Backing: Yes No Backing Type _____

Backgouging: Yes No Backgouging Method _____

Technique: Stringers Weave

ELECTRICAL CHARACTERISTICS

Current: AC DCEP DCEN

Transfer Mode (GMAW): Short-circuiting Globular Spray

BASE METAL

Material Specification _____ Grade _____

welded to Material Specification _____ Grade _____

Carbon Equivalent (Bar) _____ Bar size _____

Coated Bar: Yes No Type of Coating _____

FILLER METAL

AWS Specification _____ AWS Classification _____

Describe filler metal (if not covered by AWS specification) _____

SHIELDING

Gas: Single Mixture Composition _____ Flow rate _____

PREHEAT/INTERPASS

Preheat/Interpass Temperature (Min) _____

Interpass Temperature (Max) _____

WELDING PARAMETERS

Pass Number	Electrode Diameter	Current					Travel Speed (ipm)	Joint Detail
		Type	Amperage	WFS ipm [mm/min.]	Volts	Electrical Stickout		

Note: Attach additional sheets as required for detailing each pass.

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Continuation of Procedure Qualification Record (PQR) No. _____

TEST RESULTS

VISUAL EXAMINATION

Test Assembly Number One

Pass Fail (AWS D1.4, Clause 4.4)

Comments _____

Test Assembly Number Two

Pass Fail (AWS D1.4, Clause 4.4)

Comments _____

TENSILE TEST

Test Assembly Number One

Pass Fail (AWS D1.4, Clause 6.3.7.2)

Test Assembly Number Two

Pass Fail (AWS D1.4, Clause 6.3.7.2)

Specimen No.	Width	Thickness	Area	Ultimate Tensile Load (lbs)	Ultimate Unit Stress (psi)	Character of Failure and Location

MACROETCH TEST

Test Assembly Number One

Pass Fail (AWS D1.4, Clause 6.3.7.3)

Test Assembly Number Two

Pass Fail (AWS D1.4, Clause 6.3.7.3)

Specimen No.	Results	Remarks

Welder's Name _____ Clock No. _____ Stamp No. _____

Test conducted by _____ (Laboratory)

Test Number _____

Per _____

We, the undersigned, certify that the statements in this record are correct and that the welds were prepared and tested in accordance with the requirements of AWS D1.4/D1.4M:2011, *Structural Welding Code—Reinforcing Steel*.

Manufacturer or Contractor _____

Authorized by _____ Date _____