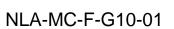
METCERT TIME & FREQUENCY METROLOGY APPLICATION FORM

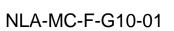




G10-M REGISTRATION as a <u>METROLOGIST</u>						(Time & Frequency – T&F)					
Practical Calibration Tasks & Requirements.					Evidence of successfully completed tasks in a laboratory:						
Number of Years of Experience in <u>Time & Frequency</u> Metrology			Please		Reference to ONE (1) Calibration per task to be entered.						
Registered as a "Trainee Metrologist" (If yes state registration number)			Submit Evidence		Reference to participation in <u>ONE</u> (1) ILC is mandatory. Data entered shall preferably not be older than 5 years.						
Holder of a SANAS Time & Frequency Certificate of Competence			YN			certificates, please ι					
Successful completion of NLA Time & Frequency Exam			Y N		number on left below to identify the task/certificate						
No	alibration Tasks (Add additional supporting tasks if desired)				Equipment Model	Cert No	(for Office use only)	Participated ILC (Details or Report No.)	(for Office use only)		
At	least five items are required, with at least one item per block (A, B & C)										
A 1	Calibration of the Frequency Generator or Source										
A2	Generation of a Frequency with known Accuracy										
А3	Calibration of Tachometers										
B1	Calibrate a Time Interval Source										
B2	Generate a Time Interval with known Accuracy										
В3	Calibration of Stopwatches										
C 1	Calibration of Frequency Counter]		
C2	Calibration of a Function Generator										
C 3	Calibrate the Phase Angle between two Periodic Waves										
C4	Measure the rise- or fall-time of a pulse										
C5	Calibrate an Oscilloscope										
•	Data including a detailed calculation of the Uncertainty of Measurements mu	ıst l	be sub	mitted	d for at least on	e of the certifi	cates sub	mitted for evaluation	on ∢		
I hereby declare that the above information is a true reflection of my experience.				Application is supported by Head of Lab or Registered Metrologist							
Name: Signature:			Name	ne: Signature:							
Date:			Positi	ion:							

July 2017 ©NLA Page 1 of 2

METCERT TIME & FREQUENCY METROLOGY APPLICATION FORM





G10-E REGISTRATION as an EXPERT METROLOGIST						(Time & Frequency – T&F)					
Practical Calibration Tasks & Requirements.				Evidence of successfully completed tasks in a laboratory:							
Number of Years of Experience in Time & Frequency Metrology			Please Submit		Reference to ONE (1) Calibration per task to be entered.						
Registered as a "Time & Frequency Metrologist" (If yes state registration number)			Evidence		Reference to participation in <u>ONE</u> (1) ILC is mandatory. Data entered shall preferably not be older than 5 years.						
Successful completion of NLA Time & Frequency Course Exam			YN			(When supplying evidence of tasks/certificates, please use					
All tasks for T&F Metrologist Level (See Form G10-M) completed					number on left below to identify the task/certificate).						
No Calibration Tasks. (Add additional supporting tasks if desired)			•	-	Equipment Model	Cert No	(for Office use only)	*Participated ILC (Details or Report No.)	(for Office use only)		
	The following 4 tasks are required:	e following 4 tasks are required:									
1	Demonstrate the maintenance (monitoring) of a Frequency Standard using GPS, apply corrections to provide Frequency Traceability in a laboratory	nstrate the maintenance (monitoring) of a Frequency Standard using GPS, determine and corrections to provide Frequency Traceability in a laboratory									
2	Calibration and characterisation of a Local, Fixed Frequency, Standard - (Oscillator										
3	alibration of a High accuracy Frequency Counter										
4	alibrate a High Accuracy Time Interval Source - (Uncertainty ≤ 1 μs)										
	At least 2 of the following 3 tasks are required:										
5	scillator phase calibration										
6	alibrate an Oscilloscope with a Bandwidth >250 MHz										
7	alibrate a Pulse for Rise and Fall Time - (Characterization)										
8											
9											
10											
>	Data including a detailed calculation of the Uncertainty of Measurements mu	ıst l	oe sub	mitte	d for at least one	of the certifi	icates sub	mitted for evaluation	on ∢		
I hereby declare that the above information is a true reflection of my experience.			Application is supported by Head of Lab or Registered Expert Metrologist								
Name: Signature:			Name	Name: Signature:							
Date:			Positi	on:							