



G14-M REGISTRATION as a <u>METROLOGIST</u>					(Acoustics)				
Practical Calibration Tasks & Requirements.				Evidence of successfully completed tasks in a laboratory: Reference to ONE (1) Calibration <u>per task</u> to be entered. Reference to participation in <u>ONE</u> (1) ILC is mandatory. Data entered shall preferably not be older than <u>5 years</u> . (When supplying evidence of tasks/certificates, please use number on left below to identify the task/certificate).					
Number of Years of Experience in Acoustics Metrology							Please Submit Evidence		
Registered as a "Trainee Metrologist" <i>(If yes state registration number)</i>									
Holder of a SANAS Certificate of Competence in Acoustics Metrology		Y	N						
Successful completion of NLA DCLF level 1 Exam		Y	N						
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 5 tasks are required:								
1	Maintaining Acoustic laboratory instrumentation								
2	Conformity Testing of Sound Level Meters								
3	Conformity Testing of Sound Calibrators								
4	Conformity Testing of Personal Sound Exposure Meters								
5	Conformity Testing of 1/1 and Fractional Octave Band Filters								
6									
7									
8									
9									
10									
▶ Data including a detailed calculation of the Uncertainty of Measurements must be submitted for at least one of the certificates submitted for evaluation ◀									
I hereby declare that the above information is a true reflection of my experience. Name: _____ Signature: _____ Date: _____				Application is supported by Head of Lab or Registered Metrologist Name: _____ Signature: _____ Position: _____					



G14-E REGISTRATION as an <u>EXPERT METROLOGIST</u>					(Acoustics)		
Practical Calibration Tasks & Requirements.			Evidence of successfully completed tasks in a laboratory: Reference to ONE (1) Calibration <u>per task</u> to be entered. Reference to participation in <u>ONE</u> (1) ILC is mandatory. Data entered shall preferably not be older than <u>5 years</u> . (When supplying evidence of tasks/certificates, please use number on left below to identify the task/certificate).				
Number of Years of Experience in Acoustics of Metrology		Please Submit Evidence					
Registered as a "Acoustics Metrologist" <i>(If yes state registration number)</i>							
All tasks Acoustics Metrologist Level (See Form G14-M) completed		Y				N	
No Calibration Tasks. (Add additional supporting tasks if desired)			Equipment Model	Cert No	<i>(for Office use only)</i>	*Participated ILC <i>(Details or Report No.)</i>	<i>(for Office use only)</i>
The following 3 tasks are required:							
1	Calibration of Working Standard Microphones						
2	Calibration of Reference Sound Sources						
3	Calibration of Microphones for Modulus and Frequency Response						
4	Realising NMS for Sound Pressure in Air (Optional)						
7							
8							
9							
▶ Data including a detailed calculation of the Uncertainty of Measurements must be submitted for at least one of the certificates submitted for evaluation ◀							
I hereby declare that the above information is a true reflection of my experience. Name: _____ Signature: _____ Date: _____			Application is supported by Head of Lab or Registered Metrologist Name: _____ Signature: _____ Position: _____				