Evidence of Prerequisite Experience

Steps to achieve HAZOP Leader (TÜV)

Step 1: attend HAZOP Leader (TÜV) course.

To attend the course, candidates must meet the following criteria:

1. a minimum of 5 years’ experience in HAZOP technique
2. university degree (master's or bachelor's degree in engineering or science discipline) or equivalent engineer level responsibilities with status certified by employer

Step 2: attend the examination

To attend the examination, candidates must attend the course **and** pass the continuous assessment.

Step 3: take the examination

Participants who pass the continuous assessment will be invited to take the examination.

What do you need to provide?

1. Your HAZOP experience. No less than less than 5 years, including at least one of the following:
* HAZOP team member
* HAZOP scribe
* HAZOP facilitator
1. Either:
* A copy of your degree certificate, or
* A reference letter from your employer which outlines your contribution to HAZOPs.

The information you provide will be evaluated by one of our experts to determine your suitability to attend the course.

|  |  |
| --- | --- |
| First name |  |
| Middle name(s): |  |
| Family name: |  |
| Date of Birth: |  | City of Birth: |  |
| Email address: |  |
| Training date: |  |

*Name provided should be your full legal name as it appears on your passport, drivers licence etc.*

Relevant Employment History

|  |  |  |  |
| --- | --- | --- | --- |
| Year | Company | Role / position | Location |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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HAZOP experience

Please provide specific details of significant contributions in HAZOPs. For each HAZOP this should include:

1. The context of the HAZOP:
* Duration of the HAZOP
* What was the HAZOP for?
1. An overview of your role, including your contributions to the HAZOP

Note: You do not need to provide a cumulative total of 5 years’ experience, but we expect to see evidence of significant contributions to multiple HAZOPs over a period of no less than 5 years.

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| --- | --- | --- | --- |
| Job title |  | Company |  |
| Role in HAZOP |  | Date(s) |  |
| 1. The context of the HAZOP:
* What was the HAZOP for?
* Duration of the HAZOP
 |  |
| 1. Overview of your role, including your contributions to the HAZOP
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| --- | --- | --- | --- |
| Job title |  | Company |  |
| Role in HAZOP |  | Date(s) |  |
| 1. The context of the HAZOP:
* What was the HAZOP for?
* Duration of the HAZOP
 |  |
| 1. Overview of your role, including your contributions to the HAZOP
 |  |

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| --- | --- | --- | --- |
| Job title |  | Company |  |
| Role in HAZOP |  | Date(s) |  |
| 1. The context of the HAZOP:
* What was the HAZOP for?
* Duration of the HAZOP
 |  |
| 1. Overview of your role, including your contributions to the HAZOP
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| --- | --- | --- | --- |
| Job title |  | Company |  |
| Role in HAZOP |  | Date(s) |  |
| 1. The context of the HAZOP:
* What was the HAZOP for?
* Duration of the HAZOP
 |  |
| 1. Overview of your role, including your contributions to the HAZOP
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| --- | --- | --- | --- |
| Job title |  | Company |  |
| Role in HAZOP |  | Date(s) |  |
| 1. The context of the HAZOP:
* What was the HAZOP for?
* Duration of the HAZOP
 |  |
| 1. Overview of your role, including your contributions to the HAZOP
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| --- | --- | --- | --- |
| Job title |  | Company |  |
| Role in HAZOP |  | Date(s) |  |
| 1. The context of the HAZOP:
* What was the HAZOP for?
* Duration of the HAZOP
 |  |
| 1. Overview of your role, including your contributions to the HAZOP
 |  |

*Please add more boxes if necessary*

|  |  |
| --- | --- |
| Total number of years’ experience in HAZOP technique*Note: A minimum of 5 years’ experience is required* | ….. years |

University degree (minimum Bachelor’s) in relevant field

|  |  |
| --- | --- |
| University name |  |
| City |  |
| Country |  |
| Technical field |  |
| Degree title |  |
| Date of award |  |
| Copy of certificate attached? | [ ]  Yes[ ]  No (a copy must be provided prior to the start of the course) |

Reference Letter

Only applicable for persons who do not have an engineering degree.

|  |  |
| --- | --- |
| Company name |  |
| City |  |
| Country |  |
| Technical field |  |
| Title / responsibility |  |
| Date |  |
| Signed letter attached? | [ ]  Yes[ ]  No (a copy must be provided prior to the start of the course) |

Declaration

[ ]  I confirm that the above information is correct and accurate to the best of my knowledge.

[ ]  I understand that inaccurate information could void my HAZOP Leader (TÜV) certificate any time in the future.

|  |  |
| --- | --- |
| Full name |  |
| Signature |  |
| Date |  |