

Maintenance training request

Date:

Company:

Email:

1. Trainee registration (to optimise training, e recommended registering no more than 3 trainees)

Trained staff - Name of trainees -	Level of qualification – please specify: Operator / Qualified Worker / Technician	Experience with the equipment concerned (please state duration)

2. On what type(s) of equipment or installation are you looking to train your staff?

- ☐ Equipment you have just acquired
- ☐ Equipment that you own
- ☐ Equipment made available by Polysoude

o Type of Power Source:

[Click here to select](#)

☐ Other: please specify which type

o Software (only PC power sources):

[Click here to select](#)

}

Please specify the type of equipment below

o Welding head:

[Click here to select](#)

☐ With AVC/OSC ☐ With integrated wire feeder

o Type(s) of wire feeder (if external):

o Special or mechanised installation:

☐ Other: Please specify:

3. What are your goals in terms of skills to be acquired for your staff?

☐ Level 1: Basic training

Goals:

- State a simple breakdown
- Identify significant symptoms

- Perform an easy repair by being helped by telephone support.

☐ Level 2: Expert training (NB: level 1 must be assimilated to access this level)

Goals:

- Perform a complete maintenance of your Polysoude welding equipment in autonomy including calibration (for power sources).

4. Where and when would you like the training to take place?

☐ Polysoude (Nantes) ☐ Other venue

☐ Preferred period:.....

5. Language requested for training?

☐ French

☐ English

☐ German

☐ Other please specify:

Special requests:

Please return your training request to the following address: :

E-mail: training@polysoude.com - Fax: +33 (0) 240 68 57 02

Save

Send by email