



National Institute for Metalworking Skills®

Application for Accreditation – Machining

Institution

Institution Name _____

Metalworking Program Name _____

Name of Administrator _____

Address _____

City, State & Zip _____

Telephone _____ Fax _____

Website _____ Email _____

Program Liaison *This is the primary contact person between your training program and NIMS.*

Name _____ Title _____

Telephone _____ Fax _____

Email _____

Level of Program *(select one)*

Secondary

Post-Secondary

Industry

Other

Machining skills areas in which accreditation is desired:

The skills areas you select should match your training curriculum. NIMS requires the first two listed below. Choose a minimum of two skills areas from the right column of the [NIMS List of Credentials](#). Before accreditation is officially awarded to your training program, at least one instructor must have earned each of the credentials you list below.

1. Measurement, Materials & Safety

7. _____

2. Job Planning, Benchwork & Layout

8. _____

3. _____

9. _____

4. _____

10. _____

5. _____

11. _____

6. _____

12. _____



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FEE SCHEDULE

Initial Accreditation:

Application, Self-Study Kit	\$500
On-Site Evaluation (program audit)	\$1000*
<i>Total Initial Accreditation Fees</i>	<i>\$1500</i>

Payment Schedule:

- \$500 Due with application for Self-Study Kit
- \$1000 Due with submission of completed Self-Study

**For travel expenses exceeding this amount, applicant will be billed appropriately.*

**This schedule is effective February 1, 2006.
Rates for are subject to change without notice.**

Payment accepted by check, credit card, and purchase order:

- Pay by check: Mail check to address below, attention Catherine Ross.
 - Pay by credit card: Call NIMS to process transaction by phone.
 - Pay by purchase order: Fax PO to Catherine Ross.

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www.nims-skills.org**