





SBL-Khas Claimable

# TENSILE & COMPRESSION TESTING MACHINE CALIBRATION

(Competency Training)

#### PROGRAMME OVERVIEW:

This training module is to train participants to comprehend calibration of tensile and or compression testing machine force measuring system according to ISO 7500-1 Metallic materials - Calibration and Verification of Static Uniaxial Testing machines. Participants shall have hands on practice on pre-calibration procedures, understand the machine calibration procedures in both tensile and or compression mode, perform calculation of key parameters, and measurement uncertainty of the subject. This training module could meet the requirements for SAMM ISO/IEC 17025 accreditation application purpose.

## **TARGET GROUP:**

Quality Managers, Technical Managers, Laboratory Managers, Supervisors, Chemist, Engineer, Signatories of test reports & certificates, Laboratories Personnel.

## **OBJECTIVE:**

At the end of the course, participants are expected to:

- 1. Acquire basic knowledge in tensile and or compression testing machine force measuring system
- 2. Perform calibration independently according to ISO 7500-1 procedure
- 3. Perform necessary calculations include uncertainty estimation based on ISO Guide [according to the model given only]
- 4. Able to generate ISO quality management system accepted calibration certificate

E056 Calibration Training

### **CONTENT:**

- 1) Principle of metrology and ISO requirement on calibration.
- 2) Understand the equipment and its use
- 3) Machine pre-calibration procedure
- 4) Determine relative resolution of force indicator.
- 5) Calibrate force indication at 3 specific angles.
- 6) Calculate relative force indication, reversibility, relative repeatability error.
- 7) Estimate uncertainty of test base on GUM

## **METHODOLOGY:**

Lectures, discussion, demonstration, hands-on practice and practical exercises

#### **CERTIFICATE:**

Participants are required to complete a project usually at the end of training or within 2 weeks of completion of the training

- ✓ Certificate of competency achieves score points above 70 %
- ✓ Certificate of attendance score points below 70 % or no submission of project

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REGISTRATION FORM (E056):				
Course Fee Training Date Venue Duration Time Venue HRDF	PUBLIC TRAINING  : RM 2,100 Per Pax  : Refer to Training Calendar  : Ascendent Training Room  : 2 Days  : 9:00 AM - 5:00 PM  : Ascendent Technology Sdn Bhd  : SBL - Khas  N-HOUSE TRAINING  : RM 6,000 Per Day  : 2 Days  : 9:00 AM - 5:00 PM	Participant Designation NRIC Mobile No. Email  Participant Designation NRIC Mobile No. Email  Participant	: Mr / Ms	
HRDF	: SBL - Khas	Designation		
<ul> <li>Maximum No.: 5 - 25 Candidates</li> <li>CANCELLATION / POSTPONEMENT POLICY</li> <li>1. Ascendent Technology Sdn.Bhd. reserves the right to cancel, postpone or make any changes to the venue and training dates due to unavoidable circumstances.</li> <li>2. Reservation can be made by telephone or email, but will only be confirmed upon the received of completed registration form and payment.</li> </ul>		NRIC Mobile No. Email  Participant Designation NRIC Mobile No.	:	······································
3. Please do not make any travel arrangements until		Email		DETAILS
<ul> <li>you have received written confirmation for your registration from us.</li> <li>4. No cancellation is allowed but a candidate replacement can be arranged.</li> <li>5. For confirm cancellation: 7 days notice prior to commencement will subjected to RM250 service charge. If less than 7 days notice, there will be no refund.</li> <li>6. Confirm postponement for in-house training less than 14 days notice prior to commencement will subjected to 50% service charge on total invoice.</li> </ul>		All cheques should be crossed and made payable to: <b>ASCENDENT TECHNOLOGY SDN BHD</b> Bank A/C No. <b>Maybank</b> 5127-6360-6820.  Admittance will be permitted upon receipt of full payment 2 weeks before the course is conducted.  Training certificate will be awarded upon received of full payment		
FOR HR DEPARTMENT				
Company Name:		Contact Person: Mr / Ms:		
Address:		Designation:		
		Department:		
		Email:		
		Mobile No:		
		Signature:		Company Stamp:
Training Date:				
Telephone:				
Type of Industr	,	2042   117 217	2042 / 012 277 221	
	<b>Tel:</b> 603-6156 0813 / 2	2813   <b>HP</b> : 012-417	3813 / 012-375 2813	

Email: sales@ascendent.com.my | Web: www.ascendent.com.my

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