

POLISHING COURSE

Filling with Laser-Welding

5 days



This technology is a highly accurate method for repairing and reconditioning parts while preserving their original shape and surface appearance.



SCAN ME

Filling with Laser-Welding

Aim of the course

To allow participants to improve their skills in order to obtain optimal results. Participants will receive theoretical instruction and perform practical exercises.

Participants (maximum 4)

The course is addressed to whom works in watchmaking service centres, likewise to owners or employees of independent bijouterie, boutiques, polishing or watchmaking workshops

Program

Practical laser welding will be performed by using the Laser machines and some polishing techniques will be teach such as polishing and satin finishing.

Tools and material

The necessary accessories, machines (Laser Master 100) and consumables will be provided by WOSTEP.

Dates

❖ **26 to 30 June 2023** ❖ **02 to 06 October 2023** ❖ **23 to 27 October 2023**

Timetable: Monday to Friday 08h30 to 12h00 and 13h30 to 17h00

Location

WOSTEP Foundation, Rue des Saars 99, 2000 Neuchâtel, Switzerland

On request:

- On-site training

Price

CHF 2'200.- per person

-10% discount for donators

-25% discount for active members

-75% discount for Partnership instructors

Certificate of attendance

A certificate of attendance will be delivered upon completion of the course.

Contact details and information

Email: wostep@wostep.ch

Website: www.wostep.ch

Phone: +41 (0) 32 729 00 30

Filling with Laser-Welding

Registration:

Personal details – Please fill in legibly, using CAPITAL letters

Title: Ms. Mr.

Last Name (s):

First name (s):

Profession / Occupation:

Next opportunities – Please select your preferred date

26 to 30.06.2023

02 to 06.10.2023

23 to 27.10.2023

Contact information

Mailing address

Name / Company name (if applicable):

Street address, n°:

Post office box:

Post code – City:

Country:

Home phone:

Work phone:

Mobile phone:

Work Email:

Home Email:

Invoicing address (if different from the above)

Name / Company (if applicable):

Contact person:

Street, n°:

Post code – City:

Country:

Where/how did you hear about WOSTEP?

WOSTEP student(s) Employer Advertisement Internet

Other:

Date: Signature:

Filling with Laser-Welding

Professional background and experience:

| | <i>Name of school / Company</i> | <i>Period</i> | <i>Hours of training</i> |
|----------------|---------------------------------|---------------|--------------------------|
| Apprenticeship | | | |
| Self-taught | | | |

Professional experience (after training):

| <i>Name of employer</i> | <i>Full-time</i> | <i>Part-time</i> | <i>Period of time</i> |
|-------------------------|--------------------------|--------------------------|-----------------------|
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |

Polishing experience:

Number of years:

Watch brand / product / external component you are most experienced with (case middle, case back, bezel, bracelet):

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Level of experience in the following techniques:

| | <i>None</i> | <i>Beginner</i> | <i>Confident</i> |
|--------------------------------|--------------------------|--------------------------|--------------------------|
| Sandblasting-Microbeadblasting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lapping | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Grinding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Felt polishing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Satin finishing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Polishing – Final finishing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cleaning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Jewellery | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Date: Signature:

Please return this registration form to: wostep@wostep.ch