



2140 Hamilton Street
 REGINA SK S4P 2E3
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Form 6A Verification of on the Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson		Social Insurance Number	
Current Address	City	Postal Code	Phone Number
Employer (Firm Name)		Name and Certificate Number of Supervising Journey person	
Address of Employer	City	Postal Code	Phone Number

Automotive Painter Subtrade	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	Trade Time Exposure In Hours
Type of Work (please print)	
Common Occupational Skills: tools and equipment, personal protective equipment, safety and inspection	
Routine Trade Tasks: document use, communication, planning of work tasks	
Vehicle Preparation: initial preparation, surface preparation, application of repair material	
Refinishing: equipment preparation, refinishing material preparation, application of refinishing material, refinishing equipment maintenance	
Pre-Delivery: quality assurance check, detailing	
Total Hours	

I Certify The Above Hours Are Accurate	Date (DD/MM/YY)	Apprentice/Tradesperson (signature)
I Certify The Above Hours Are Accurate	Date (DD/MM/YY)	Employer Representative (signature)
		Employer Representative (print name clearly)

For Commission Use Only Time Assessed: _____ Approved By: _____ Date: _____ (DD/MM/YY)
