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# Form 6A Verification of on the Job Experience

**PLEASE PRINT CLEARLY**

Apprentice/Tradesperson \_\_\_\_\_ PSE# \_\_\_\_\_

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 \_\_\_\_\_

<b>Pork Production Technician – Grower / Finisher</b>		<b>Trade Time Exposure In Hours</b>
<b>Period of Employment</b>	_____ to _____ (DD/MM/YY) (DD/MM/YY)	
<b>Type of Work</b> (please print)		
Manage feed inventories		
Develop nutritional programs		
Prepare feed for animals		
Provide feed and water for animals		
Maintain animal health		
Observe/Influence pig behaviour		
Parasite control		
Minor surgical procedures		
Collect/Deliver lab samples		
Euthanize		
Marketing		
Other		
<b>Total Hours</b>		

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)

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