



2140 Hamilton Street
 REGINA SK S4P 2E3
 Fax (306) 787-5105
 ATCAssessment@gov.sk.ca

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

Insulator (Heat & Frost)	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Performs Common Occupational Skills: uses and maintains tools and equipment; performs safety-related functions; organizes work; performs routine trade practices and used communication and mentoring techniques.	
Performs Industrial Applications: prepares for installation of insulation in industrial applications; insulates piping and fittings; insulates tanks, vessels and equipment.	
Performs Commercial Applications: prepares for installation of insulation in commercial applications; insulates plumbing systems and mechanical piping; insulates mechanical ducting; insulates mechanical equipment.	
Performs Applications Common to Industrial and Commercial: installs fire stop systems, insulates for soundproofing, installs removable covers, installs underground insulating systems.	
Performs Specialized Applications: sprays sealers, coatings and spray-on insulation; installs fire stop systems; installs fireproofing; installs insulation for refractory systems, installs insulation for cryogenic systems, insulates for marine applications (Not Common Core).	
Performs Asbestos, Lead and Mould Abatement: prepares for asbestos abatement; performs asbestos removal procedures; performs maintenance repair, performs lead abatement and mould remediation.	
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)