

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 Journeyman	
Address of Employer	City	Postal Code	Phone Number

Lather (Interior System Mechanic)	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Occupational Skills: maintenance of tools and equipment; organization of work, performing routine trade activities	
Framing: erection of non-load bearing steel assemblies and load bearing steel assemblies (Mandatory Experience Required)	
<ul style="list-style-type: none"> • door and window frames 	
Interior Systems: installation of wall systems and components; ceiling systems, access flooring systems, sound barriers, lead radiation shielding, smoke and fire barriers	
<ul style="list-style-type: none"> • suspended ceilings (Mandatory Experience Required) • gypsum board installation (Mandatory Experience Required) 	
Exterior Systems: installation of insulation and membranes; preparation of surfaces for exterior finishes, installation of exterior finishes	
Other (specify):	
Total Hours	

I Certify The Above Hours Are Accurate _____
 Date (DD/MM/YY) Apprenticeship/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)
