

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

Boilermaker	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Common Occupational Skills: using and maintaining tools and equipment; performing safety-related functions, organizing work, performing cutting and welding activities	
Rigging and Hoisting: planning lifts, rigging loads, hosting loads, performing post-lift activities	
New Construction: performing fabrication, assembling and fitting vessels and components; fastening components	
Repair, Maintenance, Upgrading and Testing: servicing vessels and components; removing vessels and components	
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)
