



2140 Hamilton Street
 REGINA SK S4P 2E3
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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 Journeyperson	
Address of Employer	City	Postal Code	Phone Number

Food and Beverage Person	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Prepares for service: performs pre-service duties, performs set up.	
Serves alcohol and wine: serves alcohol responsibly including cut-off	
Serves other beverages: preparation and service of beverages	
Takes and delivers orders: uses product knowledge, upselling of product	
Manages section: uses time management skills, maintains tables	
Bus and set tables: loads bus pans and trays, sets tables	
Handles monetary transactions and guest payments: uses point-of-sale system(s)	
Promotes tourism: promotes local area/region, province and country	
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)
