

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 _____

Painter and Decorator	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work	
Common Occupational Skills: performing safety-related functions, using and maintain tools and equipment; performing routine trade practices, performing quality control assessments	
Surface Preparation: performing general surface preparation, preparing wood surfaces for paints, coating and wall coverings; preparing concrete and masonry surfaces; preparing metal surfaces, preparing plaster surfaces and drywall	
Residential, Institutional and Commercial Paints and Coatings: preparing for the application of residential, institutional and commercial paints and coatings; applying residential, institutional and commercial paints and coatings; applies decorative/special finishes	
<ul style="list-style-type: none"> • Spray painting (residential, institutional, commercial, and industrial) 	
Wall Coverings: preparing for the application of wall coverings, applying wall coverings	
Wall Finishes: preparing for wood finishing applications; finishing wood surfaces	
Industrial Paints and Coatings: preparing for the application of industrial paints and coatings; applying industrial paints and coatings	
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)
