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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 Journey person _____

Address of Employer _____ City _____ Postal Code _____ Phone Number _____

Sprinkler Fitter	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Performs Common Occupational Skills: performs safety related functions, uses and maintains tools and equipment, organizes work, commissions systems, uses communication and mentoring	
Installs Water Supply: installs underground water supplies, installs fire and booster pumps, installs fire department connections, and private water supply systems.	
Installs Piping: prepares piping, tube and fittings for installation, installs pipe and fittings and piping components.	
Installs and Lays out of Fire Protection Systems and Devices: installs water-based systems, installs specialty fire suppression systems and detection and signal-initiating devices.	
Inspects, Tests and Maintains (ITM) Fire Protection Systems: Maintains and repairs fire protection systems, inspects and tests fire protection systems.	
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)