



Saskatchewan
Apprenticeship and
Trade Certification
Commission



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FORM 6A

Verification of On The Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson _____ Social Insurance Number _____

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 _____

Pork Production Technician – Grower / Finisher		Trade Time Exposure In Hours
Period of Employment	_____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)		
Manage feed inventories		
Develop nutritional programs		
Prepare feed for animals		
Provide feed and water for animals		
Maintain animal health		
Observe/Influence pig behaviour		
Parasite control		
Minor surgical procedures		
Collect/Deliver lab samples		
Euthanize		
Marketing		
Other		
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)