

# 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 Journeyman	
Address of Employer	City	Postal Code	Phone Number

<b>Lather (Interior System Mechanic)</b>	<b>Trade Time Exposure In Hours</b>
<b>Period of Employment</b> _____ <b>to</b> _____ (DD/MM/YY) (DD/MM/YY)	
<b>Type of Work</b> (please print)	
<b>Occupational Skills:</b> maintenance of tools and equipment; organization of work, performing routine trade activities	
<b>Framing:</b> erection of non-load bearing steel assemblies and load bearing steel assemblies (Mandatory Experience Required)	
<ul style="list-style-type: none"> <li>• door and window frames</li> </ul>	
<b>Interior Systems:</b> installation of wall systems and components; ceiling systems, access flooring systems, sound barriers, lead radiation shielding, smoke and fire barriers	
<ul style="list-style-type: none"> <li>• suspended ceilings (Mandatory Experience Required)</li> <li>• gypsum board installation (Mandatory Experience Required)</li> </ul>	
<b>Exterior Systems:</b> installation of insulation and membranes; preparation of surfaces for exterior finishes, installation of exterior finishes	
<b>Other</b> (specify):	
<b>Total Hours</b>	

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)

<b>For Commission Use Only</b> <b>Time Assessed:</b> _____ <b>Approved By:</b> _____ <b>Date:</b> _____ <span style="float: right;">(DD/MM/YY)</span>
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