

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

Refrigeration and Air Conditioning Mechanic	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work	
Perform Common Occupational Skills: perform safety related functions; use and maintain tools and equipment; organize work; use communication and mentoring techniques	
Perform Routine Trade Activities: perform work site preparation and routine trade activities	
Plans Installation: plan installation of heating, ventilation and air conditioning systems, refrigeration systems and control systems	
Performs Installation: install heating, ventilation and air conditioning systems, refrigeration systems and control systems	
Performs Commissioning: commission heating, ventilation and air conditioning systems, refrigeration systems and control systems	
Performs Maintenance and Service: maintain and service heating, ventilation and air conditioning systems, refrigeration systems and control systems	
Total Hours	

I Certify The Above Hours Are Accurate _____
 Date (DD/MM/YY) Apprenticeship/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)
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