

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 Journeyperson		
Address of Employer	City	Postal Code	Phone Number

Heavy Duty Equipment Technician	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Common Occupational Skills: uses and maintains tools and equipment, performs general maintenance and inspections, organizes work, and performs routine trade activities	
Engines and Engine Support Systems: diagnoses engines and engine support systems, repairs engines and engine support systems	
Hydraulic, Hydrostatic and Pneumatic Systems: diagnoses hydraulic, hydrostatic, pneumatic systems, repairs hydraulic, hydrostatic, and pneumatic systems	
Drivetrain Systems: diagnoses drivetrain systems, and repairs drivetrain systems	
Steering, Suspension, Brake Systems, Wheel Assemblies and Undercarriage: diagnoses steering, suspension, brake systems, wheel assemblies and undercarriage, repairs steering, suspension, brake systems, wheel assemblies and undercarriage	
Electrical and Vehicle Management Systems: diagnoses electrical systems, repairs electrical systems, diagnoses electronic vehicle management systems, repairs electronic vehicle management systems	
Environmental Control Systems: diagnoses environmental control systems, repairs environmental control systems	
Structural Components, Accessories and Attachments: diagnoses structural components, accessories and attachments, repairs structural components, accessories and attachments	
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)

Revised May/22