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 _____

Recreation Vehicle Service Technician **Period of Employment** _____ (DD/MM/YY) **to** _____ (DD/MM/YY) **Type of Work** (please print)	**Trade Time Exposure In Hours**
Common Occupational Skills: Performs safety-related activities; uses and maintains tools and equipment; performs common work practices and procedures.	
Plumbing Systems: Diagnoses plumbing systems; services potable water systems; services waste water systems.	
Electrical Systems: Diagnoses electrical systems; services AC electrical system; services DC electrical system.	
LP Gas Systems: Diagnoses LP gas system; services LP gas system.	
Appliances and Consumer Products: Maintains appliances; diagnoses appliances; repairs appliances and consumer products; installs appliances and consumer products.	
Interior and Exterior: Diagnoses interior and exterior components; services interior components; services exterior components.	
Chassis and Mechanical Components: Maintains chassis and mechanical components; diagnoses chassis and mechanical components; repairs chassis and mechanical systems; installs chassis and mechanical components.	
Towing Systems: Diagnoses towing systems; services towing 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)**

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Saskatchewan Apprenticeship and Trade Certification Commission