

# 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

<b>Guest Services Representative</b>	<b>Trade Time Exposure In Hours</b>
<b>Period of Employment</b> _____ to _____ (DD/MM/YY) (DD/MM/YY)	
<b>Type of Work</b> (please print)	
<b>Operates switchboard:</b> operating front desk phone and taking messages; processing calls, wake-up calls and phone charges	
<b>Processes reservations:</b> responding to enquires; taking/changing/cancelling reservations	
<b>Processes guest arrivals and departures:</b> preparing for guest; checking in and checking out guest, accommodating walk-in clients; verifying late check out; processing groups	
<b>Undertake departmental duties:</b> using office equipment, following operational procedures, providing services such as security, processing complaints	
<b>Provides guest service information:</b> responding to enquires	
<b>Provides tourism information:</b> promoting local attractions, provincial and national events	
<b>Total Hours</b>	

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)

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