Form 6A Verification of on the Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson			PSE#					
Current Address		City		F	Postal Code		Phone Number	
Employer (Firm Name) Name and Certificate Number of Super							vising Journeyperson	
Address of Employer City				Postal Code Phone Number				
Refrigeration and Air Conditioning Mechanic							Trade Time	
Period of Employment _		to					Exposure In	
	(DD/MM/YY	()	(DD/MN	Л/YY)			Hours	
Type of Work (please print)								
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								
					Tot	al Hours		
I Certify The Above Hours Are Ad	ccurate							
I Certify The Above Hours Are Ad	ccurato	Date (DD/M	.M/YY)		Apprentice/Tradesperson (signature)			
recently the above hours are ac	<u> </u>	Date (DD/M	M/YY)		Employer Represer	ative (signature)		
	Employer Representative (print						ame clearly)	
For Commission Use On								
Time Assessed:Approved By:Date:							(DD/MM/YY)	

Revised July/22

