Form 6A Verification of on the Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson		PSE#/MyATC#		
Current Address	City	Postal Code Ph	none Number	
Employer (Firm Name)		Name and Certificate Number of Su	pervising Journey person	
Address of Employer	City	Postal Code Ph	none Number	
Boilermaker			Trade Time	
Period of Employment	to		Exposure In	
(DD/MM,	/YY) (DD/MM/YY)	Hours	
Type of Work (please print)				
Performs Common Occupational Skills: using and maintaining tools and equipment; performing safety-related functions; organizing work; performing cutting and welding activities				
Performs Rigging and Hoisting: planning lifts; rigging loads; hosting loads; performing post-lift activities				
Completes New Construction: perform and components; fastening components				
Performs Repairs, Maintenance, Upg components; removing vessels and c				
		Total Hours	s	
I Certify The Above Hours Are Accurate				
Date (DD/MM/YY)		Apprentice/Tradesperson (sig	Apprentice/Tradesperson (signature)	
I Certify The Above Hours Are Accurate	Date (DD/MM/YY	Employer Representative (sig	Employer Representative (signature)	
		Employer Representative (prin	Employer Representative (print name clearly)	
For Commission Use Only				
Time Assessed:	_Approved By:	Date:	(DD/MM/YY)	



