Form 6A Verification of on the Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson		PSE#/MyATC#		
Current Address	City	Postal Code	Phone Number	
Employer (Firm Name)	Name and Certificate Number of Supervis			singJourneyperson
Address of Employer	City	Postal Code	Phone	Number
Instrumentation and Control Technician				Trade Time
Period of Employment to				Exposure In
(DD/MI		 M/YY)		Hours
Type of Work (please print)	.,,	, ,		
Occupational Skills: Safety-related	functions: use of tools and e	guipment: organizes wo	rk:	
communication and mentoring techniques				
Process Measuring and Indicating Devices: Installs and services pressure, temperature, level				
and flow devices; installs and services signal transducers; installs and services motion, speed,				
position and vibration devices; installs and services mass, density and consistency devices;				
installs and services process analyzers; installs and services multiple variable computing devices				
Safety and Security Systems and Devices: Installs and services safety systems and devices;				
installs and services facility security systems; installs and services safety instrumented systems				
Hydraulic, Pneumatic and Electrical Systems: Installs and services control devices for hydraulic				
systems; installs and services pneumatic equipment; installs and services electrical and				
electronic equipment				
Final Control Elements: Installs and services valves; installs and services actuators; installs and				
services positioners; configures and services variable speed drives				
Communications Systems and Devices: Installs and services control network systems; installs and services signal converters; installs and services gateways, bridges and media converters				
Control Systems and Process Control: Establishes and optimizes process control strategies;				
installs and services stand-alone controllers (SACs), programmable logic controllers (PLCs),				
distributed control systems (DCSs), human machine interfaces (HMIs), and Supervisory Control				
and Data Acquisition (SCADA) syste	ms			
		Tot	al Hours	
I Certify The Above Hours Are Accurate				
	Date (DD/MM/YY)	Apprentice/Tradespe	erson (signatur	re)
Certify The Above Hours Are Accurate				٥)
	Date (DD/MM/YY)	Employer Represent	ative (signatur	e)
		Employer Represent	me clearly)	
For Commission Use Only				
Time Assessed:Approved By:Date:				
				(DD/MM/YY)



