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 Supervising Journeyperson		
Address of Employer	City	Postal Code	Phone Number	
Ironworker (Struct	ural/Ornamental)		Trade Time	
Period of Employment	(DD/MM/YY) to (DE	D/MM/YY)	Exposure In Hours	
Type of Work (please	e print)			
-	rets occupational documentation, uipment and organizes work.	communicates in the workpla	ce, uses	
Rigging and Hoisting: Selec	cts rigging equipment and uses hoi	sting and lifting equipment.		
Cranes: Assembles and ere	cts cranes and disassembles crane	S.		
	stallation: installs primary and second systems and installs conveyors,		nstalls	
	ng: repairs components and decor miscellaneous components	nmissions, disassembles and r	removes	
		Total I	Hours	
I Certify The Above Hours Are Ac	ccurate			
·	Date (DD/MM/YY)	Apprentice/Tradespers	con (signature)	
I Certify The Above Hours Are Ac	ccurate			
	Date (DD/MM/YY)	Employer Representat	Employer Representative (signature)	
		Employer Representat	Employer Representative (print nameclearly)	
For Commission Use Only				
Time Assessed:	Approved By:	Date	:(DD/MM/YY)	

