

# 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

<b>Landscape Horticulturist</b>	<b>Trade Time Exposure In Hours</b>
<b>Period of Employment</b> _____ <b>to</b> _____ (DD/MM/YY) (DD/MM/YY)	
<b>Type of Work</b> (please print)	
<b>Performs Common Occupational Skills:</b> Performs safety-related functions, uses tools equipment and vehicles, organizes work, participates in marketing and sales, uses communication and mentoring techniques.	
<b>Applies Horticultural Principles:</b> applies horticultural practices, applies environmental practices.	
<b>Performs Landscape Construction:</b> performs pre-construction activities, installs hardscape softscape, and green infrastructure systems.	
<b>Performs Landscape Maintenance:</b> maintains hardscape, softscape and green infrastructure, maintain hardscape and green infrastructure.	
<b>Works in Production of Plan Material:</b> Constructs growing facilities, operates and maintains growing facilities, manages greenhouse crops, and manages nursery crops.	
<b>Total Hours</b>	

I Certify The Above Hours Are Accurate	Date (DD/MM/YY)	Apprentice/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> <b>Time Assessed:</b> _____ <b>Approved By:</b> _____ <b>Date:</b> _____ <span style="float: right;">(DD/MM/YY)</span>
---