Form 6A Verification of on the Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson		PSE#/My	ATC#			
Current Address	City		Postal Code	Phone	Number	
Employer (Firm Name)			Name and Certificate Number of Supervising Journeyperson			
Address of Employer	City Postal Code Phon			Phone	Number	
Construction Craft Labourer						
					Trade Time	
Period of Employment (DD/MN	to	D/MM/YY)			Exposure In	
, .	(DI	D/IVIIVI/ T T)			Hours	
Type of Work (please print)	1.16					
Occupational Skills: performs safety-related functions; uses and maintains tools and						
equipment; organizes work; performs routine trade activities. (Max credit of 600 hours for apprentices)						
Site Work: prepares site; performs groundwork; services site; performs basic demolition;						
performs safety watch. (Max credit of 600 hours for apprentices)						
Scaffolding and Access Equipment: erects, inspects, maintains, and dismantles scaffolding;						
tends to scaffold erectors; uses ladders and power-elevated work platforms; inspects and						
maintains access equipment. (Max credit of 600 hours for apprentices)						
Concrete Work: forms concrete; places and finishes concrete; modifies concrete;						
places/applies grout, epoxies, and caulking. (Max credit of 600 hours for apprentices)						
Masonry Work: sets up masonry materials, mixes mortars and grouts; cuts and washes						
masonry units; installs lintels and rough bucks; installs refractory materials; uses fireproofing						
materials; tends to bricklayers. (Max credit of 600 hours for apprentices)						
Utilities and Pipeline: installs utility piping for water and sewer installations; performs pipeline						
activities. (Max credit of 600 hours for apprentices)						
Roadwork: places road surface material; repairs road surfaces; installs barriers, culverts, road						
markings, and signs. (Max credit of 600 hours for apprentices) Total Hours						
			Iota	I Hours		
I Certify The Above Hours Are Accurate						
·	Date (DD/MM/YY)		Apprentice/Tradesp	erson (signatı	ıre)	
I Contifue The Above Hours Are Assurate					·	
I Certify The Above Hours Are Accurate	Date (DD/MM/YY)		Employer Representative (signature)			
	Date (DD/MM/11)		Employer Represent	.ative (signatu	rej	
	Employer Representative (print n				ame clearly)	
For Commission Use Only Time Assessed: Approved By: Date:						
Time Assessed.	_Approved by		Da		(DD/MM/YY)	

Revised July 2024

