

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

Lather (Interior System Mechanic)	Trade Time Exposure In Hours
Period of Employment _____ to _____ (DD/MM/YY) (DD/MM/YY)	
Type of Work (please print)	
Performs Common Occupational Skills: performs safety related functions, uses tools and equipment, organizes work, performs routine trade activities, uses communication and mentoring techniques	
Performs Framing Activities: erects non-load bearing steel assemblies and load bearing steel assemblies (a minimum of 1500 hours is required in this work activity to achieve certification) (a maximum of 3000 hours in this work activity is accepted towards certification)	
Install Interior Systems: installs wall systems and components; ceiling systems, access flooring systems, sound barriers, lead radiation shielding, smoke and fire barriers	
<ul style="list-style-type: none"> • suspended ceilings (a minimum of 1500 hours is required in this work activity to achieve certification) (a maximum of 3000 hours in this work activity is accepted towards certification) 	
<ul style="list-style-type: none"> • gypsum board installation (a minimum of 1500 hours is required in this work activity to achieve certification) (a maximum of 3000 hours in this work activity is accepted towards certification) 	
Installs Exterior Systems: installs insulation and membranes; prepares surfaces for exterior finishes, installs exterior finishes	
Total Hours	

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)

For Commission Use Only Time Assessed: _____ Approved By: _____ Date: _____ (DD/MM/YY)

Revised August, 2024