

Apprenticeship Manitoba

Trades Qualification Employer Declaration

Insulator (Heat and Frost)

This form is to be completed by the direct supervisor of the applicant.
Information provided in this form will be verified.

A. Applicant Name	Name of the individual declaring their employment experience
Full name:	

B. Work History Information	All information boxes must be completed.			
Organization / Employer name:				
From (yyyy/mm/dd):	To (yyyy/mm/dd):	Job Title:	Total Hours Worked:	
Type of Employment:	<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Other

C. Declaration of Job Tasks Performed 2012 NOA	<input checked="" type="checkbox"/> Check the NO box if you did not personally witness the applicant performing the tasks in the group. <input checked="" type="checkbox"/> Check the "Yes" box if you personally witnessed the applicant performing the tasks at the level of a journeyperson. Strike out any individual tasks not witnessed. example
A – Common Occupational Skills Includes: Uses and maintains tools and equipment; Performs safety-related functions; Organizes work; Performs routine trade practices	<input type="checkbox"/> No <input type="checkbox"/> Yes
B – Industrial Applications Includes: Prepares for installation of insulation in industrial applications; Insulates piping and fittings; Insulates tanks, vessels and equipment; Installs protective cladding	<input type="checkbox"/> No <input type="checkbox"/> Yes
C – Commercial Applications Includes: Prepares for installation of insulation in commercial applications; Insulates plumbing systems and mechanical piping; Insulates mechanical ducting; Insulates mechanical equipment	<input type="checkbox"/> No <input type="checkbox"/> Yes
D – Common Applications Includes: Installs insulation systems for refractory and cryogenic applications; Installs underground insulating systems; Insulates for soundproofing; Installs removable covers	<input type="checkbox"/> No <input type="checkbox"/> Yes
E – Distinctive Applications Includes: Sprays sealers, coatings and spray-on insulation; Installs fire stop systems; Installs fireproofing	<input type="checkbox"/> No <input type="checkbox"/> Yes
F – Asbestos Abatement Includes: Prepares for asbestos abatement; Performs asbestos removal procedures; Performs maintenance repair	<input type="checkbox"/> No <input type="checkbox"/> Yes

D. Supervisor/Employer Signature	I certify that the information I, as the current or former direct supervisor of the applicant provided is accurate. I understand that my support may allow the candidate to challenge the certification exam.	
Signature:	Date: (yyyy/mm/dd)	
Printed name:	Daytime phone:	

Office use only:	Verified - <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature:	Comments:
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