SkilledTradesBC Customer Service
800 – 8100 Granville Ave
Richmond, BC V6Y 3T6
Tel: 778-328-8700
Fax: 778-328-8701
Toll Free: 1-866-660-6011
customerservice@skilledtradesbc.ca

MARINE MECHANICAL TECHNICIAN

STATUTORY DECLARATION OF WORK EXPERIENCE

This form is used to declare work experience for periods during which you were self-employed, or a previous employer will not complete an Employer Declaration.

Note: Unless your work experience was gained through self-employment, applications must be accompanied by at least one Employer Declaration. For more information, see Instructions for Certification Challenge or Supervision and Sign-off Authority.

"Marine Mechanical Technician" means a person who installs, troubleshoots, repairs and maintains engines, drive trains and other mechanical, electrical and fluid systems typically used in the recreational marine industry. Some light commercial and industrial applications are serviced. This work involves all aspects of repairs to diesel engines, gasoline engines, outboard engines, conventional inboard drive trains and stern drives. To qualify to challenge certification in this trade or be granted authority to supervise and sign-off on apprentices in this trade, individuals must have:

To qualify to challenge certification in this trade or be granted authority to supervise and sign-off on apprentices in this trade, individuals must have:

- worked a minimum of **7,200 hours** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D.

Holders of **Certificate of Qualification in Inboard/ Outboard Mechanic, Automotive Service Technician, Motorcycle Technician, Heavy Duty Equipment Technician, Truck and Transport Mechanic, or Diesel Engine Mechanic** will be eligible to challenge this certification by documenting **4,950 hours** of directly related Marine Mechanical Technician work experience.

Holders of a **Certificate of Qualification in Marine Service Technician** will be eligible to challenge this certification by documenting **6,075 hours** of directly related Marine Mechanical Technician work experience.

A. Applicant Name

Legal First Name:	Legal Middle Name(s):	Legal Last Name:

B. Self-Employment or Employment Information of Applicant

Enter the contact information for your own business if you are self-employed or your previous employer who will not complete an Employer Declaration.

Name of Organization/Employer/Business:		Business Registration Number: (Self-Employment only)
Address (Street Name/Number, Building/Unit Number):		City:
Province/ State:	Country:	Postal Code/ Zip Code:
Business Phone Number: ( )	Email Address:	Website:

Enter the dates and number of hours for this period of employment or self-employment. You may combine multiple periods of self-employment on one form, but you must separate periods of employment with different employers on separate forms.

Dates of Employment (MM/DD/YYYY): From: To:	Total Number Hours of **Marine Mechanical Technician** Experience Accumulated in Period:
Job Title of Applicant:	

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C. Reason for Statutory Declaration

Indicate why a Statutory Declaration is required for this period of employment:

☐ Applicant was self-employed ☐ Employer will/can not complete Employer Declaration

Applicants **must** attempt to contact current or previous employers to request an Employer Declaration to be filled out and signed.

If you have been unable to obtain an Employer Declaration for any portion of your non-self-employed work experience, **indicate the steps you have taken to try to obtain it.**

D. Statutory Declaration of Job Task Performance

By checking "Yes" or "No" in the Declaration Response column, indicate whether you have performed the job tasks listed below during the period indicated in Section B.

JOB TASKS (76)	DECLARATION RESPONSE	
Occupational Skills		
Uses tools and equipment	☐ Yes	☐ No
Works safely	☐ Yes	☐ No
Follows safe yard and marina practices	☐ Yes	☐ No
Operates vessels	☐ Yes	☐ No
Uses documentation	☐ Yes	☐ No
Uses fasteners and fittings	☐ Yes	☐ No
Uses composites	☐ Yes	☐ No
Selects and uses lubricants and coolants	☐ Yes	☐ No
Vessel Systems		
Demonstrates an understanding of Thru-hulls	☐ Yes	☐ No

Enter the applicant's initials on every page of this form

I hereby certify, that to the best of my knowledge, the information I am providing is true and accurate.	Applicant's Initials:

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STATUTORY DECLARATION OF WORK EXPERIENCE

JOB TASKS (76)	DECLARATION RESPONSE	
Demonstrates an understanding of cabin heating systems	☐ Yes	☐ No
Demonstrates an understanding of A/C and refrigeration theory	☐ Yes	☐ No
Demonstrates an understanding of safe propane installations	☐ Yes	☐ No
Demonstrates an understanding of davits, hoists and windlasses	☐ Yes	☐ No
Demonstrates an understanding of fire suppression equipment and lock outs	☐ Yes	☐ No
Inspects and repairs mechanical and electrical steering systems	☐ Yes	☐ No
Installs fresh/waste water plumbing systems	☐ Yes	☐ No
Demonstrates an understanding of water makers	☐ Yes	☐ No
Services and installs bilge pump systems	☐ Yes	☐ No
Hydraulic Equipment		
Demonstrates an understanding of hydraulic theory and system components	☐ Yes	☐ No
Services and installs hydraulic steering systems	☐ Yes	☐ No
Diagnoses and repairs hydraulic equipment	☐ Yes	☐ No
Metal Working		
Performs metal fabrication operations	☐ Yes	☐ No
Uses oxy-acetylene torch	☐ Yes	☐ No
Electrical		
Demonstrates an understanding of principles of electrical theory	☐ Yes	☐ No
Reads and uses electrical schematics	☐ Yes	☐ No
Uses electrical measurement and diagnostic equipment	☐ Yes	☐ No
Demonstrates an understanding of storage battery types and applications	☐ Yes	☐ No
Selects, installs and tests batteries	☐ Yes	☐ No
Services and installs AC chargers and inverters	☐ Yes	☐ No
Diagnoses alternators and charging faults	☐ Yes	☐ No
Diagnoses engine starters and solenoids	☐ Yes	☐ No
Installs DC electrical wiring and circuits for electrical equipment	☐ Yes	☐ No
Diagnoses wiring and electrical components	☐ Yes	☐ No
Diagnoses and installs alarms, gauges and senders	☐ Yes	☐ No

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STATUTORY DECLARATION OF WORK EXPERIENCE

JOB TASKS (76)	DECLARATION RESPONSE	
Services and installs gensets	☐ Yes	☐ No
Engine Support Systems		
Services and installs fuel tanks	☐ Yes	☐ No
Inspects and installs fuel lines	☐ Yes	☐ No
Services fuel pumps and filters	☐ Yes	☐ No
Demonstrates an understanding of fuels and fuel additives	☐ Yes	☐ No
Demonstrates an understanding of inboard and I/O exhaust system types and design	☐ Yes	☐ No
Inspects and repairs exhaust systems	☐ Yes	☐ No
Demonstrates an understanding of engine room/compartment layout and ventilation	☐ Yes	☐ No
Engines		
Demonstrates an understanding of reciprocating engine theory and operation	☐ Yes	☐ No
Diagnoses and repairs engine cooling systems	☐ Yes	☐ No
Performs leak down, cylinder balance and compression tests	☐ Yes	☐ No
Disassembles, inspects and reassembles engines	☐ Yes	☐ No
Measures engine components and specific machining requirements	☐ Yes	☐ No
Performs engine components adjustments procedures	☐ Yes	☐ No
Boat Trailers		
Services boat trailers	☐ Yes	☐ No
Marine Drive Systems		
Diagnoses propellors	☐ Yes	☐ No
Removes and installs propellors	☐ Yes	☐ No
Installs I/O drives	☐ Yes	☐ No
Services and diagnoses stern drive components	☐ Yes	☐ No
Repairs transom housings	☐ Yes	☐ No
Demonstrates an understanding of jet drive and surface piercing drives	☐ Yes	☐ No
Services inboard drive trains	☐ Yes	☐ No
Diagnoses inboard transmissions and V-drives	☐ Yes	☐ No
Diagnoses drive train vibration sources	☐ Yes	☐ No
Installs and services engine mounting systems	☐ Yes	☐ No

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JOB TASKS (76)	DECLARATION RESPONSE	
Diagnoses and repairs O/B drive components	☐ Yes	☐ No
Services thrusters and trim tabs	☐ Yes	☐ No
Ignition Systems		
Services ignition systems	☐ Yes	☐ No
Diagnoses ignition system faults	☐ Yes	☐ No
Diagnoses and repairs conventional ignition systems	☐ Yes	☐ No
Diagnoses and repairs electronic ignition systems	☐ Yes	☐ No
Control Systems		
Diagnoses and repairs engine control systems	☐ Yes	☐ No
Demonstrates an understanding of autopilot types, systems	☐ Yes	☐ No
Fuel Delivery		
Diagnoses diesel injector pumps	☐ Yes	☐ No
Diagnoses and services diesel injectors	☐ Yes	☐ No
Services diesel fuel transfer pump and primary fuel systems	☐ Yes	☐ No
Inspects and treats diesel fuel	☐ Yes	☐ No
Services engine preheat systems	☐ Yes	☐ No
Services turbochargers and intercoolers	☐ Yes	☐ No
Services gasoline fuel system components	☐ Yes	☐ No
Diagnoses and repairs gasoline fuel systems faults	☐ Yes	☐ No
Diagnoses and repairs oil injection systems	☐ Yes	☐ No

E. Applicant Signature

I certify that the information I have provided is true and accurate. (Note: Collection and protection of personal information on this form is in accordance with the provisions of the Freedom of Information and Protection of Privacy Act.)

Applicant Name (please print):	Applicant Signature:	Date: (MM/DD/YYYY)

Enter the applicant's initials on every page of this form

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STATUTORY DECLARATION OF WORK EXPERIENCE

F. References

Minimum of Three References must accompany **each Statutory Declaration form**. Include names and contact information of minimum three individuals who can attest to your hours and/or scope of trade. References listed must be related to the organization and period of employment listed in Section B of this form.

Each individual listed will be contacted by SkilledTradesBC to verify the information provided on your application.

1. Reference

Relationship to Applicant:	☐ Former Employee	☐ Contractor	☐ Supplier
	☐ Co-worker	☐ Client	☐ Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:	Language(s) that reference can communicate: (Check all that apply) ☐ English		☐ Other (specify):
Organization/Business Name:		Position/Title:	
Phone Number:		Email Address:	

2. Reference

Relationship to Applicant:	☐ Former Employee	☐ Contractor	☐ Supplier
	☐ Co-worker	☐ Client	☐ Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:	Language(s) that reference can communicate: (Check all that apply) ☐ English		☐ Other (specify):
Organization/Business Name:		Position/Title:	
Phone Number:		Email Address:	

3. Reference

Relationship to Applicant:	☐ Former Employee	☐ Contractor	☐ Supplier
	☐ Co-worker	☐ Client	☐ Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference:	Language(s) that reference can communicate: (Check all that apply) ☐ English		☐ Other (specify):
Organization/Business Name:		Position/Title:	
Phone Number:		Email Address:	

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