PAINTER AND DECORATOR

EMPLOYER DECLARATION OF WORK EXPERIENCE

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

This form is used to declare work experience for periods of employment and must be completed by a **direct supervisor of the applicant**, who will be contacted by SkilledTradesBC.

Note: An Employer Declaration of Work Experience form must be completed for each period of employment.

This form is not to be used for periods of self-employment. For more information, see Instructions for Certification Challenge or Supervision and Sign-Off Authority.

"Painter and Decorator" means a person who prepares and applies paint or any organic/inorganic coating when applied in the same manner as paints; sand/hydro blasts for cleaning decorative or preparatory purposes to steel, concrete or wood, installs rubber, fiberglass, acid resistant or metalized linings to tanks, pipes, or other vessels; installs all wall covering on buildings or structure surfaces.

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 **7,290 hours** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D.

A. Applicant Name

Enter the name of the individual for whom this form is being completed.

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

B. Employment Information of Applicant

Enter the business information for the applicant's period of employment declared for this trade.

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

Enter the dates and number of hours for this period of employment.

Dates of Applicant's Employment (MM/DD/YYYY): From: To:	Total Number Hours of **Painter And Decorator** Experience Accumulated in Period:
Job Title of Applicant:	

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C. Supervisor Contact Information

Enter the name and contact information for the person who directly supervised the applicant during this employment period. Ensure the information given is current as the application will be denied if this person cannot be contacted by SkilledTradesBC.

First and Last Name of Applicant's Direct Supervisor:	Supervisor Position or Title:
Supervisor's Phone Number: ( )	Supervisor E-Mail Address:
Language(s) that the employer/supervisor can communicate: (check all that apply) ☐ English ☐ Other (please specify): _____	

D. Supervisor Declaration of Job Task Performance of Applicant

By checking "Yes" or "No" in the Declaration Response column, indicate whether you, as the direct supervisor of the applicant, have personally witnessed the applicant performing the job tasks listed.

JOB TASKS (50)	SUPERVISOR DECLARATION RESPONSE	
PERFORMS COMMON OCCUPATIONAL SKILLS		
Performs Safety-Related Functions		
Uses personal protective equipment (PPE) and safety	☐ Yes	☐ No
Maintains safe work environment	☐ Yes	☐ No
Uses And Maintains Tools And Equipment		
Maintains tools and equipment	☐ Yes	☐ No
Uses rigging, hoisting and lifting equipment	☐ Yes	☐ No
Uses access equipment	☐ Yes	☐ No
Performs Routine Trade Practices		
Uses documentation	☐ Yes	☐ No
Determines project requirements	☐ Yes	☐ No

Supervisor must enter name and initials on every page of this form

Supervisor First and Last Name (Please Print):	
I hereby certify, that to the best of my knowledge, the information I am providing as a current or past supervisor of the applicant (as named on page 1 of this document), is true and accurate.	Supervisor's Initials:

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JOB TASKS (50)	SUPERVISOR DECLARATION RESPONSE	
Plans job	☐ Yes	☐ No
Protects surroundings	☐ Yes	☐ No
Handles materials	☐ Yes	☐ No
Assesses substrate conditions and deficiencies	☐ Yes	☐ No
Assesses product conditions and deficiencies	☐ Yes	☐ No
Assesses quality of painted or coated surfaces and wall coverings	☐ Yes	☐ No
Uses Communication And Mentoring Techniques		
Uses communication techniques	☐ Yes	☐ No
Uses mentoring techniques	☐ Yes	☐ No
PREPARES SURFACES		
Performs General Surface Preparation		
Removes existing paints and coatings	☐ Yes	☐ No
Removes existing wall coverings and adhesives	☐ Yes	☐ No
Cleans surfaces	☐ Yes	☐ No
Primes surfaces	☐ Yes	☐ No
Sands surfaces	☐ Yes	☐ No
Applies caulking	☐ Yes	☐ No
Prepares Wood Surfaces For Paints, Coatings And Wall Coverings		
Treats wood surfaces	☐ Yes	☐ No
Repairs minor imperfections in wood	☐ Yes	☐ No
Prepares Concrete And Masonry Surfaces		
Mechanically treats concrete and masonry surfaces	☐ Yes	☐ No
Chemically treats concrete and masonry surfaces	☐ Yes	☐ No

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JOB TASKS (50)	SUPERVISOR DECLARATION RESPONSE	
Repairs concrete and masonry surfaces	☐ Yes	☐ No
Prepares Metal Surfaces		
Treats metal surfaces	☐ Yes	☐ No
Repairs metals surfaces	☐ Yes	☐ No
Prepares Plaster Surfaces And Drywall		
Repairs existing plaster surfaces and drywall	☐ Yes	☐ No
Finishes new drywall	☐ Yes	☐ No
PREPARES AND APPLIES RESIDENTIAL, INSTITUTIONAL AND COMMERCIAL PAINTS, COATINGS AND FINISHES		
Prepares For Application Of Residential, Institutional And Commercial Paints And Coatings		
Prepares residential, institutional and commercial paints and coatings	☐ Yes	☐ No
Installs residential, institutional and commercial reinforcing mesh	☐ Yes	☐ No
Applies Residential, Institutional And Commercial Paints And Coatings		
Applies residential, institutional and commercial paints and coatings with brushes	☐ Yes	☐ No
Applies residential, institutional and commercial paints and coatings with rollers	☐ Yes	☐ No
Applies residential, institutional and commercial paints and coatings with applicators	☐ Yes	☐ No
Applies residential, institutional and commercial paints and coatings with spray equipment	☐ Yes	☐ No
Applies Decorative/Specialty Finishes		
Applies paints and coatings using decorative techniques	☐ Yes	☐ No
Creates faux finishes	☐ Yes	☐ No
Applies gilding	☐ Yes	☐ No
Applies stencils and graphics	☐ Yes	☐ No
Creates textured finishes	☐ Yes	☐ No

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JOB TASKS (50)	SUPERVISOR DECLARATION RESPONSE	
Applies multi-spec coatings	☐ Yes	☐ No
PREPARES AND APPLIES WALL COVERINGS		
Prepares For Application Of Wall Coverings		
Treats surfaces for wall coverings	☐ Yes	☐ No
Lays out surface	☐ Yes	☐ No
Prepares wall coverings	☐ Yes	☐ No
Applies Wall Coverings		
Applies adhesives	☐ Yes	☐ No
Installs vinyl wall coverings	☐ Yes	☐ No
Installs fabric and natural material wall coverings	☐ Yes	☐ No
Installs rigid wall coverings	☐ Yes	☐ No
Repairs existing wall coverings	☐ Yes	☐ No

E. Supervisor Signature

I certify that the information I, as the current or former direct supervisor of the applicant, 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.)

Supervisor Signature:	Date Signed: (MM/DD/YYYY)

Supervisor must enter name and initials on every page of this form

Supervisor First and Last Name (Please Print):	
I hereby certify, that to the best of my knowledge, the information I am providing as a current or past supervisor of the applicant (as named on page 1 of this document), is true and accurate.	Supervisor's Initials: