

STATUTORY 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

Legal Last Name:

customerservice@skilledtradesbc.ca

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.

"Truck and Transport Mechanic" means a person who maintains, rebuilds, overhauls, reconditions, and does diagnostic troubleshooting of motorized commercial truck, bus, and road transport equipment.

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 9,495 hours performing the tasks listed in Section D, and
- experience performing at least 70% of the job tasks listed in Section D.

Holders of a **Certificate of Qualification** in **Heavy Duty Equipment Technician** will be eligible to challenge this certification by documenting **4,995 hours** of directly related work experience.

Holders of a **Certificate of Qualification** in **Transport Trailer Technician** or **Diesel Engine Mechanic** will be eligible to challenge this certification by documenting **7,995 hours** of directly related work experience.

Holders of a Canadian **military certificate** in **Vehicle Technician MT #129 / MT #411, QL5 or higher** will be eligible to challenge this certification by submitting an Exam Application Form along with a copy of the certificate.

Legal Middle Name(s):

A. Applicant Name

Legal First Name:

B. Self-Employment	or Employment Inform	nation of Applica	nt	
Enter the contact information for Declaration.	or your own business if you are s	elf-employed or your p	revious em	ployer who will not complete an Employer
Name of Organization/Employ	ver/Business:		Business only)	Registration Number: (Self-Employment
Business Address (Street Name	e/Number, Building/Unit Num	nber):		City:
Province/ State:	Country:			Postal Code/ Zip Code:
Business Phone Number:		Website:		
	nours for this period of employm you must separate periods of emp			y combine multiple periods of self- s on separate forms.
Dates of Employment (MM/DI	D/YYYY):	Total Number Experience Ac		Truck and Transport Mechanic I in Period:
From:	То:			
Job Title of Applicant:		•		



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C. Indica	Reason for Statutory Declaration te why a Statutory Declaration is required for	this period of	employment:		
	Applicant was self-employed		Employer will/can not complete Employ	yer Declaration	
Applic	ants must attempt to contact current or previ	ous employe	rs to request an Employer Declaration to be	filled out and sig	ned.
	nave been unable to obtain an Employer Dec eve taken to try to obtain it.	laration for ar	ny portion of your non-self-employed work o	experience, indic	cate the steps
	0	le Doufous			
D. By che period	Statutory Declaration of Job Tas cking "Yes" or "No" in the Declaration Respo indicated in Section B.			DECLA	RATION
By che	cking "Yes" or "No" in the Declaration Respo indicated in Section B.	nse column, i		DECLA	, and the second
By che period	cking "Yes" or "No" in the Declaration Respondent in Section B. JOB TA	nse column, i		DECLA	RATION
PERI Per	cking "Yes" or "No" in the Declaration Response indicated in Section B. JOB TA FORMS COMMON OCCUPATIONAL forms safety-related functions	nse column, i		DECLA	RATION
PERE Per	Cking "Yes" or "No" in the Declaration Response indicated in Section B. JOB TA FORMS COMMON OCCUPATIONAL forms safety-related functions Maintains safe work environment	ASKS (127)	ndicate whether you have performed the jol	DECLA	RATION
PERF	Corms Common Occupations FORMS COMMON OCCUPATIONAL forms safety-related functions Maintains safe work environment Uses personal protective equipment (PPE) an	ASKS (127) L SKILLS d safety equip	ndicate whether you have performed the job	DECLA RESP	RATION PONSE
PERF Per	Corms common occupations FORMS COMMON OCCUPATIONAL forms safety-related functions Maintains safe work environment Uses personal protective equipment (PPE) an Implements specific safety protocols for hybri	ASKS (127) L SKILLS d safety equip	ndicate whether you have performed the job	DECLA RESP	RATION CONSE
PERI Per Use	JOB TA GORMS COMMON OCCUPATIONAL Forms safety-related functions Maintains safe work environment Joses personal protective equipment (PPE) an Implements specific safety protocols for hybrics and maintains tools and equipment	ASKS (127) L SKILLS d safety equip d electric veh	ndicate whether you have performed the job	DECLA RESP	RATION PONSE
PERI Per Use	JOB TA GORMS COMMON OCCUPATIONAL forms safety-related functions Maintains safe work environment Jess personal protective equipment (PPE) an implements specific safety protocols for hybrics and maintains tools and equipment Jess hand, power, measuring, testing, and dia Jess hand, power, measuring, testing, and dia	ASKS (127) L SKILLS d safety equip d electric veh	ndicate whether you have performed the job	DECLA RESP	RATION PONSE
PERI Per Use	JOB TA FORMS COMMON OCCUPATIONAL FORMS COMMON OCCUPATIONAL Forms safety-related functions Maintains safe work environment Jess personal protective equipment (PPE) an Implements specific safety protocols for hybric Les and maintains tools and equipment Jess hand, power, measuring, testing, and dia Jess shop equipment	ASKS (127) L SKILLS d safety equip d electric veh	ndicate whether you have performed the job	DECLA RESP Yes Yes Yes Yes	RATION PONSE No No No
PERF Per Use	JOB TA GORMS COMMON OCCUPATIONAL FORMS COMMON OCCUPATIONAL Forms safety-related functions Maintains safe work environment Jess personal protective equipment (PPE) an Implements specific safety protocols for hybric Es and maintains tools and equipment Jess hand, power, measuring, testing, and dia Jess shop equipment Jess hoisting, lifting and staging equipment	ASKS (127) L SKILLS d safety equip d electric veh	ndicate whether you have performed the job	DECLA RESP Yes Yes Yes Yes	RATION PONSE
PERF Per Use	JOB TA FORMS COMMON OCCUPATIONAL FORMS COMMON OCCUPATIONAL Forms safety-related functions Maintains safe work environment Jess personal protective equipment (PPE) an Implements specific safety protocols for hybric Les and maintains tools and equipment Jess hand, power, measuring, testing, and dia Jess shop equipment	ASKS (127) L SKILLS d safety equip d electric veh	ndicate whether you have performed the job	DECLA RESP Yes Yes Yes Yes Yes	RATION PONSE No No No No No
PERF Per Use	JOB TA GORMS COMMON OCCUPATIONAL FORMS COMMON OCCUPATIONAL Forms safety-related functions Maintains safe work environment Jess personal protective equipment (PPE) an Implements specific safety protocols for hybric Es and maintains tools and equipment Jess hand, power, measuring, testing, and dia Jess shop equipment Jess hoisting, lifting and staging equipment	ASKS (127) L SKILLS d safety equip d electric veh ent agnostic tools	ndicate whether you have performed the job	DECLA RESP Yes Yes Yes Yes Yes Yes Yes	RATION PONSE No No No No No No No



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JOB TASKS (127)	DECLARATION RESPONSE			
Uses electronic devices and systems for diagnostics and programming	Yes	☐ No		
Performs routine work practices				
Uses documentation and reference materials	Yes	☐ No		
Maintains fluids and lubricants	☐ Yes	☐ No		
Services hoses, tubing and fittings	☐ Yes	☐ No		
Services filters	☐ Yes	☐ No		
Services bearings and seals	☐ Yes	☐ No		
Uses fasteners and sealing devices	☐ Yes	☐ No		
Uses communication and mentoring techniques				
Uses communication techniques	☐ Yes	☐ No		
Uses mentoring techniques	☐ Yes	☐ No		
SERVICES, DIAGNOSES AND REPAIRS ENGINES AND SUPPORTING SYSTEMS				
Services, diagnoses and repairs base engines				
Services base engines	☐ Yes	☐ No		
Diagnoses base engines	☐ Yes	☐ No		
Repairs base engines	☐ Yes	☐ No		
Services, diagnoses and repairs lubrication systems				
Services lubrication systems	☐ Yes	☐ No		
Diagnoses lubrication systems	☐ Yes	☐ No		
Repairs lubrication systems	☐ Yes	☐ No		
Services, diagnoses and repairs intake systems				
Services intake systems	☐ Yes	☐ No		
Diagnoses intake systems	☐ Yes	☐ No		
Repairs intake systems	☐ Yes	☐ No		
Services, diagnoses and repairs exhaust systems				
Services exhaust systems	☐ Yes	☐ No		
Diagnoses exhaust systems	☐ Yes	☐ No		
Repairs exhaust systems		☐ 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 Init	ials:		



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JOB TASKS (127)	DECLARATION RESPONSE	
Services, diagnoses and repairs engine management systems		
Services engine management systems	☐ Yes	☐ No
Diagnoses engine management systems	☐ Yes	☐ No
Repairs engine management systems	☐ Yes	☐ No
Services, diagnoses and repairs fuel delivery systems		
Services fuel delivery systems	☐ Yes	☐ No
Diagnoses fuel delivery systems	Yes	☐ No
Repairs fuel delivery systems	Yes	☐ No
Services, diagnoses and repairs engine retarder systems		
Services engine retarder systems	Yes	☐ No
Diagnoses engine retarder systems	☐ Yes	☐ No
Repairs engine retarder systems	☐ Yes	☐ No
Services, diagnoses and repairs cooling systems		
Services cooling systems	☐ Yes	☐ No
Diagnoses cooling systems	☐ Yes	☐ No
Repairs cooling systems	☐ Yes	☐ No
SERVICES, DIAGNOSES AND REPAIRS AIR SYSTEMS AND BRAKE SYSTEMS		
Services, diagnoses and repairs air systems		
Services air systems	☐ Yes	☐ No
Diagnoses air systems	☐ Yes	☐ No
Repairs air systems	☐ Yes	☐ No
Services, diagnoses and repairs brake systems		
Services brake systems	☐ Yes	☐ No
Diagnoses brake systems	Yes	☐ No
Repairs brake systems	☐ Yes	☐ No
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JOB TASKS (127)	DECLARATION RESPONSE				
SERVICES, DIAGNOSES AND REPAIRS ELECTRICAL AND ELECTRONIC SYSTEMS					
Services, diagnoses and repairs battery systems					
Services battery systems	Yes	☐ No			
Diagnoses battery systems	Yes	☐ No			
Repairs battery systems	Yes	☐ No			
Services, diagnoses and repairs charging systems					
Services charging systems	Yes	☐ No			
Diagnoses charging systems	Yes	☐ No			
Repairs charging systems	Yes	☐ No			
Services, diagnoses and repairs spark ignition systems					
Services spark ignition systems	Yes	☐ No			
Diagnoses spark ignition systems	Yes	☐ No			
Repairs spark ignition systems	Yes	☐ No			
Services, diagnoses and repairs starting systems					
Services starting systems	☐ Yes	☐ No			
Diagnoses starting systems	☐ Yes	☐ No			
Repairs starting systems	☐ Yes	☐ No			
Services, diagnoses and repairs electrical components and accessories					
Services electrical components and accessories	☐ Yes	☐ No			
Diagnoses electrical components and accessories	☐ Yes	☐ No			
Repairs electrical components and accessories	☐ Yes	☐ No			
Services, diagnoses and repairs vehicle management systems and electronic components					
Services vehicle management systems and electronic components	☐ Yes	☐ No			
Diagnoses vehicle management systems and electronic components	Yes	☐ No			
Repairs vehicle management systems and electronic components	☐ 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 Ini	tials:			



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JOB TASKS (127)	DECLARATION RESPONSE	
SERVICES, DIAGNOSES AND REPAIRS DRIVE TRAINS		
Services, diagnoses and repairs clutches		
Services clutches	☐ Yes	☐ No
Diagnoses clutches	☐ Yes	☐ No
Repairs clutches	☐ Yes	☐ No
Services, diagnoses and repairs manual transmissions and transfer cases		
Services manual transmissions and transfer cases	Yes	☐ No
Diagnoses manual transmissions and transfer cases	Yes	☐ No
Repairs manual transmissions and transfer cases	Yes	☐ No
Services, diagnoses and repairs automatic transmissions		
Services automatic transmissions	Yes	☐ No
Diagnoses automatic transmissions	☐ Yes	☐ No
Repairs automatic transmissions	Yes	☐ No
Services, diagnoses and repairs automated transmissions		
Services automated transmissions	Yes	☐ No
Diagnoses automated transmissions	Yes	☐ No
Repairs automated transmissions	Yes	☐ No
Services, diagnoses and repairs driveline systems		
Services driveline systems	Yes	☐ No
Diagnoses driveline systems	☐ Yes	□ No
Repairs driveline systems	Yes	☐ No
Services, diagnoses and repairs drive axle assemblies		
Services drive axle assemblies	☐ Yes	□ No
Diagnoses drive axle assemblies	☐ Yes	No
Repairs drive axle assemblies	Yes	No
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JOB TASKS (127)	DECLARATION RESPONSE	
Services, diagnoses and repairs drive train retarders		
Services drive train retarders	Yes	☐ No
Diagnoses drive train retarders	☐ Yes	☐ No
Repairs drive train retarders	Yes	☐ No
SERVICES, DIAGNOSES AND REPAIRS STEERING, CHASSIS/FRAMES, SUSPENSION HUBS	NS, TIRES, WI	HEELS AND
Services, diagnoses and repairs steering systems		
Services steering systems	Yes	☐ No
Diagnoses steering systems	☐ Yes	☐ No
Repairs steering systems	☐ Yes	☐ No
Services, diagnoses and repairs chassis/frames		
Services chassis/frames	Yes	☐ No
Diagnoses chassis/frames	☐ Yes	☐ No
Repairs chassis/frames	Yes	☐ No
Services, diagnoses and repairs suspensions		
Services suspensions	☐ Yes	☐ No
Diagnoses suspensions	☐ Yes	☐ No
Repairs suspensions	☐ Yes	☐ No
Services, diagnoses and repairs hitches and couplers		
Services hitches and couplers	☐ Yes	☐ No
Diagnoses hitches and couplers	☐ Yes	☐ No
Repairs hitches and couplers	☐ Yes	☐ No
Services, diagnoses and repairs tires, wheels and hubs		
Services tires, wheels and hubs	Yes	☐ No
Diagnoses tires, wheels and hubs	Yes	☐ No
Repairs tires, wheels and hubs	Yes	 No
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JOB TASKS (127)	DECLARATION RESPONSE	
SERVICES, DIAGNOSES AND REPAIRS CABS		
Services, diagnoses and repairs interior cab components		
Services interior cab components	☐ Yes	☐ No
Diagnoses interior cab components	☐ Yes	☐ No
Repairs interior cab components	☐ Yes	☐ No
Services, diagnoses and repairs exterior cab components		
Services exterior cab components	☐ Yes	☐ No
Diagnoses exterior cab components	☐ Yes	☐ No
Repairs exterior cab components	☐ Yes	☐ No
SERVICES, DIAGNOSES AND REPAIRS TRAILERS		
Services, diagnoses and repairs trailer components and accessories		
Services trailer components and accessories	☐ Yes	☐ No
Diagnoses trailer components and accessories	☐ Yes	☐ No
Repairs trailer components and accessories		☐ No
Services, diagnoses and repairs heating and refrigeration systems		
Services heating and refrigeration systems		☐ No
Diagnoses heating and refrigeration systems	☐ Yes	☐ No
Repairs heating and refrigeration systems	☐ Yes	☐ No
SERVICES, DIAGNOSES AND REPAIRS CLIMATE CONTROL SYSTEMS		
Services, diagnoses and repairs heating and ventilation systems		
Services heating and ventilation systems	Yes	☐ No
Diagnoses heating and ventilation systems	☐ Yes	☐ No
Repairs heating and ventilation systems	☐ Yes	☐ No
Services, diagnoses and repairs air conditioning systems		
Services air conditioning systems	☐ 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 Init	tials:



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JOB TA	DECLARATION RESPONSE						
Diagnoses air conditioning systems		☐ Yes	☐ No				
Repairs air conditioning systems	☐ Yes	☐ No					
SERVICES, DIAGNOSES AND REPAIRS HYDRAULIC SYSTEMS							
Services, diagnoses and repairs hydra	alic systems						
Services hydraulic systems		☐ Yes	☐ No				
Diagnoses hydraulic systems		☐ Yes	☐ No				
Repairs hydraulic systems		☐ Yes	☐ No				
SERVICES, DIAGNOSES AND REPAIRS	HYBRID AND ELECTRIC VEHICLES (EV)						
Services, diagnoses and repairs hybrid	vehicles						
Services hybrid vehicles		☐ Yes	☐ No				
Diagnoses hybrid vehicles		☐ Yes	☐ No				
Repairs hybrid vehicles	☐ Yes	☐ No					
Services, diagnoses and repairs electri	c vehicles (EV)						
Services electric vehicles (EV)	☐ Yes	☐ No					
Diagnoses electric vehicles (EV)	☐ Yes	☐ No					
Repairs electric vehicles (EV)	☐ Yes	☐ No					
E. Applicant Signature I certify that the information I have provided is true accordance with the provisions of the Freedom of In	and accurate. (Note: Collection and protection of personformation and Protection of Privacy Act.)	onal information c	on this form is in				
Applicant Name (please print):	Applicant Signature:	Date: (MM/DD/YY	YYY)				
Enter the applicant's initials on every page of this fo I hereby certify, that to the best of my knowledge,	orm the information I am providing is true and accurate.	Applicant's Init	tials:				



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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 Empl	oyee		Contractor		Supplier
		Co-worker			Client		Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference	:		Language(s) th	nat ref	erence can communi	cate:	(Check all that apply)
			☐ English				Other (specify):
Organization/Business Name:					Position/Title:		
Phone Number:					Email Address:		
2. Reference					'		
Relationship to Applicant:		Former Empl	oyee		Contractor		Supplier
		Co-worker			Client		Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference	:		Language(s) th	nat ref	erence can communi	cate:	(Check all that apply)
			☐ English				Other (specify):
Organization/Business Name:					Position/Title:		
Phone Number:					Email Address:		
3. Reference					1		
Relationship to Applicant:		Former Empl	oyee		Contractor		Supplier
		Co-worker			Client		Other (i.e. HR; Book keeper; Accountant, Business Partner) please specify:
First and Last Name of Reference	:		Language(s) th	nat ref	erence can communi	cate:	(Check all that apply)
			☐ English				Other (specify):
Organization/Business Name:					Position/Title:		
Phone Number:					Email Address:		
Enter the applicant's initials o	n ev	ery page of th	is form				
hereby certify, that to the be	est o	f my knowled	lge, the inforn	natio	n I am providing i	s true	e and accurate. Applicant's Initials: