

EMPLOYER DECLARATION OF WORK EXPERIENCE

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 (33)	SUPERVISOR DECLARATION RESPONSE	
Applies Safe Work Practices		
Controls workplace hazards	☐ Yes	☐ No
Uses personal protective equipment	☐ Yes	☐ No
Applies OSH regulations and WorkSafe BC Standards	☐ Yes	☐ No
Uses fire safety practices	☐ Yes	☐ No
Applies first aid practices	☐ Yes	☐ No
Applies WHMIS practices	☐ Yes	☐ No
Applies Task Specific Safety Practices		
Applies confined space awareness training	☐ Yes	☐ No
Applies working at heights training	☐ Yes	☐ No
Applies TDG training	☐ Yes	☐ No
Applies mobile equipment training	☐ Yes	☐ No

Enter the supervisor's name and initials (repeat 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:

JOB TASKS (33)	SUPERVISOR DECLARATION RESPONSE	
Uses Tools and Equipment		
Uses hand tools	☐ Yes	☐ No
Uses power tools	☐ Yes	☐ No
Uses ladders and platforms	☐ Yes	☐ No
Uses testing equipment	☐ Yes	☐ No
Organizes Work		
Uses communication skills	☐ Yes	☐ No
Applies mathematical principles	☐ Yes	☐ No
Handles materials	☐ Yes	☐ No
Interprets drawings and specifications	☐ Yes	☐ No
Uses manufacturer and supplier documentation	☐ Yes	☐ No
Plans a project	☐ Yes	☐ No
Maintains Environmental Standards		
Assesses environmental hazards	☐ Yes	☐ No
Controls environmental standards	☐ Yes	☐ No
Installs/Removes and Maintains Storage Tanks		
Installs/maintains above ground storage tanks	☐ Yes	☐ No
Removes above ground storage tanks	☐ Yes	☐ No
Installs/maintains below ground storage tanks	☐ Yes	☐ No
Removes below ground storage tanks	☐ Yes	☐ No
Installs/Removes and Maintains Fueling and Monitoring Systems		
Removes petroleum piping systems	☐ Yes	☐ No
Installs/maintains petroleum piping and containment systems	☐ Yes	☐ No

Enter the supervisor's name and initials (repeat 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:

JOB TASKS (33)	SUPERVISOR DECLARATION RESPONSE	
Describes tank monitoring and leak detection systems	☐ Yes	☐ No
Installs/Removes and Maintains Pumps and Dispensers		
Installs and removes suction pumps	☐ Yes	☐ No
Maintains and repairs suction pumps	☐ Yes	☐ No
Installs and removes submersible pumps and dispensers	☐ Yes	☐ No
Maintains and repairs submersible pumps and dispensers	☐ 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)
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Enter the supervisor's name and initials (repeat 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: