PROFESSIONAL COOK 1
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.

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 **1000 hours (Challenge) or 5000 hours (Sign-Off Authority)** performing the tasks listed in Section D, and
- experience performing at least **70%** of the job tasks listed in Section D
- valid **FOODSAFE Level 1 Certification (BC Program)** OR **equivalent** (See BCCDC for accepted equivalencies); **(attach copy of document)**

Holders of **Canadian military certificate** in **Cook MT#861**, **QL5 or higher** will be eligible to challenge this certification.

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)
Mailing Address:		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 **Cook (Professional Cook 1)** Experience Accumulated in that Period:
Job Title of Applicant:	

Enter the applicant name (repeat on every page of this form)

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

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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.** If sufficient evidence of steps taken is not provided, the application may not be approved.

_____

_____

_____

_____

_____

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	Frequently	Occasionally	Never
A. OCCUPATIONAL SKILLS			
Follow roles and responsibilities in the kitchen	☐	☐	☐
Apply safe work practices	☐	☐	☐
Apply food safety standards	☐	☐	☐
Use tools and equipment; follow and convert recipes	☐	☐	☐
Use common menu terminology	☐	☐	☐
Receive and store supplies; handle waste appropriately	☐	☐	☐
Apply principles of seasoning and basic ingredient knowledge	☐	☐	☐
B. STOCKS, SOUPS AND SAUCES			
Prepare stocks from scratch	☐	☐	☐
Use thickening agents	☐	☐	☐
Prepare basic soups (clear, cream, purée) from scratch	☐	☐	☐
Prepare basic sauces (white, blonde, brown, purée, emulsion)	☐	☐	☐
C. VEGETABLES AND FRUITS			
Prepare common vegetables	☐	☐	☐

Enter the applicant name (repeat on every page of this form)

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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

Job tasks	Frequently	Occasionally	Never
Prepare fruits	☐	☐	☐
D. STARCHES			
Prepare basic potato dishes	☐	☐	☐
Prepare dry pasta and noodle dishes	☐	☐	☐
Prepare rice	☐	☐	☐
E. MEATS			
Trim and portion cut meats	☐	☐	☐
Cook basic meat dishes using moist and dry heat methods	☐	☐	☐
F. POULTRY			
Trim and portion cut chicken and turkey	☐	☐	☐
Cook basic poultry dishes using moist and dry heat methods	☐	☐	☐
G. SEAFOOD			
Fillet flat and round fish; clean bivalves and shrimp	☐	☐	☐
Cook basic fish dishes using moist and dry heat methods	☐	☐	☐
Cook basic shellfish dishes using moist and dry heat methods	☐	☐	☐
H. GARDE-MANGER			
Prepare basic salad dressings from scratch	☐	☐	☐
Prepare basic salads	☐	☐	☐
Prepare hot and cold sandwiches	☐	☐	☐
I. EGGS, BREAKFAST COOKERY, AND DAIRY			
Prepare egg dishes	☐	☐	☐
Prepare breakfast items other than eggs	☐	☐	☐
Cook with dairy and cheese	☐	☐	☐
J. BAKED GOODS AND DESSERTS			
Apply basic methods used in baking	☐	☐	☐
Prepare basic pies and pastry from scratch	☐	☐	☐
Prepare fruit desserts and custards from scratch	☐	☐	☐
Prepare quick breads from scratch	☐	☐	☐
Prepare cookies from scratch	☐	☐	☐
Prepare basic yeast breads from scratch	☐	☐	☐
K. BEVERAGES			

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Job tasks	Frequently	Occasionally	Never
Prepare coffee and tea products	☐	☐	☐

E.   Applicant Signature

I certify that the information I have provided is 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 name (repeat on every page of this form)

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

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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 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:

Enter the applicant name (repeat on every page of this form)

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