

Applicant Name

Legal First Name:

WATER WELL DRILLER

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 customerservice@skilledtradesbc.ca

Legal Last Name:

To qualify to challenge certification in this trade, you must:

- Have worked a minimum of 4,860 hours performing some or all of the job tasks listed in Section E of this form, and
- Have experience performing at least **70**% of those tasks

2,430 documented hours of directly related work experience for holders of a Certificated of Qualification in Geotechnical/Environmental Driller OR Geoexchange Driller will be required to challenge the Certificate of Qualification Examination.

3,260 documented hours of directly related work experience for holders of a Certificated of Qualification in Well Pump Installer will be required to challenge the Certificate of Qualification Examination.

A Statutory Declaration of Work Experience is used to declare work experience for periods during which you were self-employed or a previous employer is unavailable to complete an Employer Declaration. Please note that unless your work experience hours were gained through self-employment, your application to challenge certification will not be accepted if it is only accompanied by a Statutory Declaration. Non-self-employed applicants must provide an Employer Declaration from at least one employer who can verify work experience. For more information, see Instructions for Certification Challenge.

The information provided on this form is used to assess and to validate your work experience in this trade.

Legal Middle Name(s):

B. Supervisor or Self-Employm	ent Contact Infor	mation		
Enter the contact information for the Supervis your own business if you are self-employed.	or at your previous emplo	oyer who is unavailable	to complete an Employer Declaration, or for	
Name of Organization/Employer/Business:	Supervisor Name:		Supervisor's Position/Title:	
Suite Number: Street Number and Name	e:			
City:	Province:		Postal Code:	
Telephone Number:	Email Address:		Business Registration Number: (Self-Employment only)	
C. Employment or Self-Employ Enter the dates and number of hours for this p one form, but separate periods of employment	eriod of employment or s	self-employment. Com	bine multiple periods of self-employment on	
Dates of Employment (MM/DD/YYYY):			Water Well Driller Experience Accumulated in tha	
From: To:		Period:		
Job Title of Applicant:				
Enter the applicant name (repeat on every pag	ge of this form).			
Legal First Name:	Legal Middle Name(s):		Legal Last Name:	



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D. Indica	Reason for Statutory Declaration is required to the why a Statutory Declaration is required to the statutory Declaratio		f employment:				
	Applicant was self-employed		Employer will not complete Employer Declaration				
	Employer is no longer in business		Employment reco	ords are not availab	le		
Empl	cants must attempt to contact current or oyer Declaration for any portion of your n ient evidence of steps taken is not provid	non-self-employed	work experience, ii	idicate the steps you			
	Statutory Declaration of Job ecking "Yes" or "No" in the Declaration For you got tasks you did not perform during the state of the stat	Response column,	indicate whether or	not you have perfori	ned the job tasks lis	sted below	7. Cross
Job T	'asks					Declar Respo	
Includ	Safety and Maintenance ing: Use and care of hand tools, use and main e on a fuel supply system.	tain hydraulic systen	ns, know and use safet	procedures and perfo	rm and maintain	Yes: No:	
Includ	g Equipment ing: Operate and maintain compressed air sys is, identify different drill bits, and use differen		site, identify the cable	tool system, able to us	e multiple drilling	Yes: No:	
Well Construction and Monitoring Including: Design water wells, use well development techniques, monitor groundwater and know trade regulations.				Yes: No:			
Pumping Systems Including: Design and install water pumps at site, troubleshoot and maintain pumps, install and wire motor controls.				Yes: No:			
Well Development and Maintenance Including: Perform reclamation, drill monitoring wells, know groundwater regulations, perform well closure, identify geology and hydrogeology, identify sources of water, and perform aquifer tests.			Yes: No:				
Regulations, Metric and Intro to Gas and Monitoring Wells Including: Follow environmental regulations, perform and interpret chemistry tests, read and interpret maps.			Yes: No:				
.							
	the applicant name (repeat on every pag	ge of this form).	0(c):	Legal Last	Namo		



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Date: (MM/DD/YYYY)

F. Confirmation of Prerequisite Credentials or Certificates

For some trades, evidence that the applicant has earned prerequisite credentials or certificates is required before the individual is permitted to challenge certification. For those trades, you must prove you have the required prerequisite credentials. Prerequisite credentials for this trade are listed below.

There are no prerequisite credentials or certificates for this trade.

G. Applicant Signature

Applicant Name (please print):

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 Signature:

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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H. References

References must accompany all Statutory Declarations. Include with your completed Statutory Declaration the names and contact information of three individuals who can verify your self-declared work experience in this trade. This may include suppliers (maximum one), former employees (maximum one), contractors, or regular, long-term clients (maximum one).

Each individual listed will be contacted by the Industry Training Organization (ITO) responsible for this trade or SkilledTradesBC to verify the information provided on your application.

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1. Reference				
Legal Last Name of Reference:	Legal First Name of	Reference:		
Organization/Business Name:	Position/Title:			
Business Phone Number:	Reference Cell Num	aber:		
Relationship to Applicant:	Email Address:			
2. Reference	<u> </u>			
Legal Last Name of Reference:	Legal First Name of	Reference:		
Organization/Business Name:	Position/Title:			
Business Phone Number:	Reference Cell Num	nber:		
Relationship to Applicant:	Email Address:	Email Address:		
3. Reference				
Legal Last Name of Reference:	Legal First Name of	Reference:		
Organization/Business Name:	Position/Title:			
Business Phone Number:	Reference Cell Num	aber:		
Relationship to Applicant:	Email Address:			
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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