

FLOOR COVERING INSTALLER
EMPLOYER DECLARATION
OF WORK EXPERIENCE

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D. Supervisor Declaration of Job Task Performance

By checking “Yes” or “No” in the Declaration Response column, indicate whether or not you, as the direct supervisor of the applicant, have personally witnessed the applicant performing the job tasks listed. Cross out any job tasks you did not see the applicant perform.

Job Tasks	Declaration Response
Occupational Skills Including: Using tools and equipment, Organizing work, Identifying materials, Assessing floor.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Floor Preparation Including: Removing existing floorcovering and accessories, Preparing substrate, Installing underlayment.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Carpet Including: Installing carpets, Performing specialized carpet procedures, Installing carpet on stairs, Servicing carpet installations.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Resilient Flooring Including: Installing resilient tiles, Installing resilient sheet goods, Performing specialized resilient flooring procedures, Installing specialty flooring products and accessories, Servicing resilient flooring installations.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Wood and Laminate Flooring Including: Installing pre-finished hardwood, engineered wood and laminate flooring, Servicing pre-finished hardwood, engineered wood and laminate flooring.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

E. 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 or receive Supervision and Sign-Off Authority. For those trades, a current or previous employer must verify that the applicant has the required prerequisite credentials.

There are no prerequisite credentials or certificates for this trade.

F. Supervisor Signature

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

Supervisor name (Please Print):	Supervisor Signature:	Date Signed: (MM/DD/YYYY)

Enter the Supervisor and Applicant names from Page 1 on every page of this form

Supervisor First and Last Name:	Applicant First and Last Name: