



**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)	
<input type="checkbox"/> English <span style="margin-left: 150px;"><input type="checkbox"/> Other (please specify): _____</span>	

**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 (80)	Declaration Response
<b>PERFORM SAFETY-RELATED FUNCTIONS</b> Maintains safe work environment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses personal protective equipment (PPE) and safety equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>USES TOOLS AND EQUIPMENT</b> Uses hand tools	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses power tools, pneumatic tools, and hot-air welding, induction and fuelled equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses hoisting, lifting and rigging equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses access equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses hot process equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses motorized equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ORGANIZES WORK</b> Uses documentation and reference materials	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Interprets blueprints and drawings	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

*Enter the supervisor and applicant names (repeat on every page of this form)*

Supervisor First and Last Name:	Applicant First and Last Name:
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**ROOFER**  
EMPLOYER DECLARATION  
OF WORK EXPERIENCE

<b>Job Tasks (80)</b>	<b>Declaration Response</b>
Estimates material	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Assesses worksite conditions	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Positions equipment and material on the ground and on the roof	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Prepares material disposal systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Evaluates roof conditions near rooftop equipment installations	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>USES COMMUNICATION AND MENTORING TECHNIQUES</b> Uses communication techniques	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses mentoring techniques	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PREPARES ROOF FOR REPLACEMENT</b> Protects surrounding area	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Removes loose debris	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Removes roofing and flashings	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Prepares roof substrate	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Performs minor adjustments to penetrations, curbs and parapets	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PREPARES DECK FOR ROOF INSTALLATION</b> Inspects deck	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Cleans surface of deck	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Verifies placement of roof penetrations, curbs and parapets	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Dries deck	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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**ROOFER**  
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Job Tasks (80)	Declaration Response
<b>APPLIES LOW SLOPE ROOFING COMPONENTS</b> Installs support panels	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Primes substrate	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies vapour retarder, vapour barrier and air barrier	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs insulation	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs cover board	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs drains, vents, curbs and penetrations	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies ballast, walkways and protective surfaces	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs metal flashings	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>APPLIES LOW SLOPE ROOFING MEMBRANES</b> Relaxes membranes	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Sets membranes	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies membranes using hot-liquid process	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies membranes using torched-on method	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies membranes using hot-air welding	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies membranes using cold applied methods	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies membranes using mechanical fasteners	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies loose-laid membranes	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (80)	Declaration Response
Applies liquid-applied membranes	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs membrane flashings	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs temporary seals and temporary drains	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>PERFORMS COMMON STEEP SLOPE PRACTICES</b> Installs steep slope underlayment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs steep slope venting	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs steep slope valley applications	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs steep slope saddles/crickets	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs steep slope penetration flashings	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>APPLIES SHINGLES</b> Determines layout of shingles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs starter strip and starter course	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Fastens shingles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Cuts shingles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Tabs shingles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs metal flashings for shingled roofs	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>APPLIES ROOF TILES</b> Installs battens/strapping for roof tiles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Fastens roof tiles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (80)	Declaration Response
Cuts roof tiles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs closure strips for roof tiles	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs ridge and hip caps	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs metal flashings for tiled roofs	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>APPLIES PRE-FORMED METAL ROOFING</b> Installs battens/strapping for pre-formed metal roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Fastens pre-formed metal roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Cuts sheet metal	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs closure strips for pre-formed metal roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs snow guards	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs metal flashings for pre-formed metal roofs	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>WATERPROOFS SURFACES</b> Prepares waterproofing substrates	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies waterproofing membrane	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs green, sustainable, vegetative and protected membrane components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>DAMP-PROOFS SURFACES</b> Applies damp-proofing materials	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Applies protection layer	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>ASSESSES ROOF CONDITION</b> Performs roof inspections	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (80)	Declaration Response
Performs cut test	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Determines maintenance or repair required	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>MAINTAINS AND REPAIRS LOW SLOPE ROOFING</b> Maintains low slope roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs low slope roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>MAINTAINS AND REPAIRS STEEP SLOPE ROOFING</b> Maintains steep slope roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs steep slope roofing	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

**E. 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 (repeat on every page of this form)*

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