



# TRUCK AND TRANSPORT MECHANIC

## EMPLOYER DECLARATION OF WORK EXPERIENCE

SkilledTradesBC Customer Service  
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 customerservice@skilledtradesbc.ca

### 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 (8)	Declaration Response
<b>Occupational Skills</b> Includes: Completing maintenance records and documents; operating and maintaining tools and equipment; inspecting and cleaning vehicle components; conducting road tests; and maintaining vehicle.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>Chassis and Frames</b> Includes: Modifying length and height of frames; and working on suspensions, hitches, and couplers.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>Air Systems, Brakes, and Steering</b> Includes: Working on air systems, braking systems, steering systems, and tires, wheels, rims and hubs.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>Electrical and Electronic Systems</b> Includes: Working on electrical systems; charging systems; starting systems; ignition systems; electrical conductors and connectors; electronic components, and electrical and electronic accessories.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>Cab and Body</b> Includes: Working on heating, ventilation, air conditioning and refrigeration systems; trailer bodies; and cab body and trim.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>Engine and Supporting Systems</b> Includes: Working on engines; cooling systems; lubrication systems; fuel systems; intake, exhaust and emission systems; and auxiliary braking systems.	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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Job Tasks (8)	Declaration Response
<b>Drive Train</b> Includes: Working on clutches; standard transmissions; automatic transmissions; drive lines; and differentials and transfer cases.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
<b>Accessories</b> Includes: Working on accessories and hydraulic systems.	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)
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*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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