

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

RECREATION VEHICLE SERVICE TECHNICIAN

EMPLOYER DECLARATION OF WORK EXPERIENCE

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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 <input type="checkbox"/> Other (please specify): _____	

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 (88)	Declaration Response
PERFORMS SAFETY-RELATED ACTIVITIES Uses personal protective equipment (PPE) and safety equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Maintains safe work environment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
USES AND MAINTAINS TOOLS AND EQUIPMENT Uses tools and equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses lifting, moving and access equipment	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
PERFORMS COMMON WORK PRACTICES AND PROCEDURES Uses documents	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Identifies recalls and service bulletins	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Performs pre-delivery inspections (PDI)	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
USES COMMUNICATION AND MENTORING TECHNIQUES Uses communication techniques	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Uses mentoring techniques	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 (88)	Declaration Response
DIAGNOSES PLUMBING SYSTEMS Diagnoses potable water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses waste water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES POTABLE WATER SYSTEMS Maintains potable water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs potable water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs potable water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES WASTE WATER SYSTEMS Maintains waste water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs waste water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs waste water systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
DIAGNOSES ELECTRICAL SYSTEMS Diagnoses AC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses DC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses generators	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES AC ELECTRICAL SYSTEMS Maintains AC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs AC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs AC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES DC ELECTRICAL SYSTEMS Maintains DC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (88)	Declaration Response
Repairs DC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs DC electrical systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES GENERATORS Maintains generators	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs generators	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
DIAGNOSES LIQUEFIED PETROLEUM (LP) GAS SYSTEMS Diagnoses LP gas supply systems (high pressure)	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses LP gas distribution systems (low pressure)	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES LP GAS SYSTEMS Maintains LP gas systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs LP gas systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs LP gas systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
DIAGNOSES APPLIANCES Diagnoses water heaters	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses furnaces	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses cooktops and ranges	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses refrigerators and ice makers	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses air conditioners and heat pumps	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES WATER HEATERS Maintains water heaters	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (88)	Declaration Response
Repairs water heaters	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs water heaters	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES FURNACES Maintains furnaces	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs furnaces	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs furnaces	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES COOKTOPS AND RANGES Maintains cooktops and ranges	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs cooktops and ranges	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs cooktops and ranges	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES REFRIGERATORS AND ICE MAKERS Maintains refrigerators and ice makers	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs refrigerators and ice makers	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs refrigerators and ice makers	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES AIR CONDITIONERS (A/C) AND HEAT PUMPS Maintains air conditioners and heat pumps	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs air conditioners and heat pumps	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs air conditioners and heat pumps	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES CONSUMER PRODUCTS Replaces consumer products	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Installs consumer products	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
DIAGNOSES INTERIOR AND EXTERIOR COMPONENTS Diagnoses interior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses exterior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES INTERIOR COMPONENTS Maintains interior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs interior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs interior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES EXTERIOR COMPONENTS Maintains exterior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs exterior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs exterior components	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
DIAGNOSES FRAMES AND MECHANICAL COMPONENTS Diagnoses frames	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses running gear	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses levelling systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses slide-out systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses lifting systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES FRAMES Maintains frames	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (88)	Declaration Response
Repairs frames	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES RUNNING GEAR Maintains running gear	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs running gear	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES LEVELLING SYSTEMS Maintains levelling systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs levelling systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs levelling systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES SLIDE-OUT SYSTEMS Maintains slide-out systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs slide-out systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES LIFTING SYSTEMS Maintains lifting systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs lifting systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
DIAGNOSES TOWING SYSTEMS Diagnoses tow vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Diagnoses towed vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
SERVICES TOW VEHICLE SYSTEMS Maintains tow vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs tow vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs tow vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

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Job Tasks (88)	Declaration Response
SERVICES TOWED VEHICLE SYSTEMS Maintains towed vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Repairs towed vehicle systems	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Installs towed vehicle 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)

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

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