Saskatchewan Apprenticeship and Trade Certification Commission

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ATCAssessment@gov.sk.ca

Form 6A Verification of on the Job Experience

PLEASE PRINT CLEARLY

Apprentice/Tradesperson _____ PSE# _____

Current Address _____ City _____ Postal Code _____ Phone Number _____

Employer (Firm Name) _____ Name and Certificate Number of Supervising Journeyperson _____

Address of Employer _____ City _____ Postal Code _____ Phone Number _____

Aircraft Maintenance Engineer Technician **Period of Employment** _____ (DD/MM/YY) **to** _____ (DD/MM/YY)	**Trade Time Exposure In Hours**
Type of Work	
Component identification	
Repairs airframe fuel systems	
Installs fluids lines and fittings	
Repairs hydraulic/pneumatic power systems	
Services, maintains and repairs landing year systems	
Installs/Repairs propellers	
Repairs aircraft coverings and finishes	
Repairs turbine engines	
Preventative maintenance and inspections	
Services environmental systems	
Repairs instruments and Nav/Com systems	
Total Hours	

I Certify The Above Hours Are Accurate _____ Date (DD/MM/YY) _____ Apprentice/Tradesperson (signature)

I Certify The Above Hours Are Accurate _____ Date (DD/MM/YY) _____ Employer Representative (signature)

_____ Employer Representative (print name clearly)

For Commission Use Only
Time Assessed:_____ **Approved By:**_____ **Date:** _____ **(DD/MM/YY)**