

Apprenticeship Manitoba

Trades Qualification Employer Declaration

Automotive Service Technician

This form is to be completed by the direct supervisor of the applicant.

Information provided in this form will be verified.

A. Applicant Name	Name of the individual declaring their employment experience
Full name:	

B. Work History Information	All information boxes must be completed.		
Organization / Employer name:			
From (yyyy/mm/dd):	To (yyyy/mm/dd):	Job Title:	Total Hours Worked:
Type of Employment:	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Seasonal <input type="checkbox"/> Other		

C. Declaration of Job Tasks Performed 2016 RSOS	<input checked="" type="checkbox"/> Check the NO box if you did not personally witness the applicant performing the tasks in the group. <input checked="" type="checkbox"/> Check the "Yes" box if you personally witnessed the applicant performing the tasks at the level of a journeyperson. Strike out any individual tasks not witnessed. example
A – Performs Common Occupational Skills Includes: Performs safety-related functions; Uses tools, equipment and documentation; Uses communication and mentoring techniques	<input type="checkbox"/> No <input type="checkbox"/> Yes
B – Diagnoses and Repairs Engine and Engine Support Systems Includes: Diagnoses engine systems; Repairs engine systems; Diagnoses gasoline engine support systems; Repairs gasoline engine support systems; Diagnoses diesel engine support systems; Repairs diesel engine support systems	<input type="checkbox"/> No <input type="checkbox"/> Yes
C – Diagnoses and Repairs Vehicle Module Communications Systems Includes: Diagnoses vehicle networking systems; Repairs vehicle networking systems	<input type="checkbox"/> No <input type="checkbox"/> Yes
D – Diagnoses and Repairs Driveline Systems Includes: Diagnoses driveline systems; Repairs driveline systems	<input type="checkbox"/> No <input type="checkbox"/> Yes
E – Diagnoses and Repairs Electrical and Comfort Control Systems Includes: Diagnoses electrical systems and components; Repairs electrical systems and components; Diagnoses heating, ventilation and air conditioning (HVAC) and comfort control systems; Repairs HVAC and comfort control systems	<input type="checkbox"/> No <input type="checkbox"/> Yes
F – Diagnoses and Repairs Steering and Suspension, Braking, Control Systems, Tires, Hubs and Wheel Bearings Includes: Diagnoses steering and suspension, braking, control systems, tires, wheels, hubs and wheel bearings; Repairs steering and suspension, braking, control systems, tires, wheels, hubs and wheel bearings	<input type="checkbox"/> No <input type="checkbox"/> Yes
G – Diagnoses and Repairs Restraint Systems, Body Components, Accessories and Trim Includes: Diagnoses restraint systems, body components, accessories and trim; Repairs restraint systems, body components, accessories and trim	<input type="checkbox"/> No <input type="checkbox"/> Yes
H – Diagnoses and Repairs Hybrid and Electric Vehicles (EV) Includes: Diagnoses hybrid and EV; Repairs hybrid and EV	<input type="checkbox"/> No <input type="checkbox"/> Yes

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D. Supervisor/Employer Signature	I certify that the information I, as the current or former direct supervisor of the applicant provided is accurate. I understand that my support may allow the candidate to challenge the certification exam.	
Signature:		Date: (yyyy/mm/dd)
Printed name:		Daytime phone:

Office use only:	Verified - <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature:	Comments:
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