## **Apprenticeship Manitoba**

### **Trades Qualification Statutory Declaration**

#### **Concrete Finisher**

Office use only:

Verified -  $\square$  Yes

 $\square$ No

Signature:

This form is to be completed by the applicant. Information provided in this form will be verified.

Unless your work experience hours were gained through self-employment, Trades Qualification applications will not be accepted if they are only accompanied by a Statutory Declaration. Non-self-employed applicants must provide at least one employer declaration from an employer who can verify your work experience.

A. Applicant Name	Name of the individual declaring their employment experience				
Full name:	•				
B. Reason for Statutory Declaration		Indica	Indicate why a Statutory Declaration is required?		
☐ Employer is no longer in business			☐ Employment records are not available		
☐ Applicant was self-employed (references required)			$\square$ Employer will not complete Employer Declaration		
				e indicate below all the efforts that you have	
made to obtain an Employer Declar	ation. If sufficient evidence	e of steps	taken is not provided,	the application may not be approved.	
C. Work History Information				hours worked, and nature of employment for the	
C. Work History Information			od this declaration appl	lies to.	
C. Work History Information Organization / Employer name:			od this declaration appl		
Organization / Employer name:	To (yyyy/mm/dd):		od this declaration appl Business Registration	lies to.	
<u> </u>		perio	od this declaration appl Business Registration	lies to.  n Number: (self-employed only)	
Organization / Employer name: From (yyyy/mm/dd):		perio	od this declaration appl Business Registration	lies to.  n Number: (self-employed only)  Total Hours Worked: (only hours on the tools)	

Comments:

## **Apprenticeship Manitoba**

# **Trades Qualification Statutory Declaration Concrete Finisher**

This form is to be completed by the applicant. Information provided in this form will be verified.

	_		
	☐ Check the "No" box if none of the tasks in the group were performed by		
D. Declaration of Job Tasks Performed	you.		
	☐ Check the "Yes" box if you performed the tasks at the level of a		
2006 NOA	journeyperson.		
	Strike out any individual tasks not performed. Ex. Installs motors		
A – COMMON OCCUPATIONAL SKILLS		□ No	
Includes: Uses tools and equipment; Organizes work; Prepares site; Uses formwork		□ Yes	
B – CONCRETE PLACEMENT		□ No	
Includes: Places concrete; Levels concrete		□ Yes	
C – CONCRETE FINISHING		□ No	
Includes: Floats concrete; Hand-tools concrete; Trowels concrete; Applies surface treatments to plastic concrete.		□ Yes	
D – CONCRETE CURING AND PROTECTION		□ No	
Includes: Cures concrete; Protects concrete.		□ Yes	
E – CONCRETE MODIFICATION, REPAIR AND GROUTING		□ No	
Includes: Repairs concrete; Cuts and cores cured concrete; Applies surface treatments to hardened concrete; Grouts.		□ Yes	

E. Applicant Signature	I certify that the information I provided is accurate.	
Signature:		Date: (yyyy/mm/dd)
Printed name:		Daytime phone:

## **Apprenticeship Manitoba**

### **Trades Qualification Statutory Declaration**

### **Concrete Finisher**

This form is to be completed by the applicant. Information provided in this form will be verified.

F. References	References must be provided for all self-employment Statutory Declaration forms.
experience. This may include a supplier, a forme reference per category.	ions the names and contact information of two people who can verify your self-employed work or employee, a contractor in the industry, or a regular, long term client. Maximum of one enticeship Manitoba to verify the information provided in your application.
First Name:	Last Name:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:
First Name:	Last Name:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address: