



TRADE EXPERIENCE VERIFICATION OUTDOOR POWER EQUIPMENT TECHNICIAN

Date YYYY/MM/DD	Employer		
Address	City	Territory/Province	Postal code
Phone	Fax	Email	

This is to verify that _____ has worked as
PRINT NAME

a **Outdoor Power Equipment Technician** from _____, _____ to _____,
MONTH DAY YEAR MONTH DAY

_____ for a total of _____ hours spending the following percentage of the time at the tasks below:
YEAR

Engine and engine support systems	_____ %	Jet drives/Lower units/Gear housings	_____ %
Fuel systems	_____ %	Power trim/Tilt/Hydraulics	_____ %
Electrical/Electronic systems	_____ %	Diagnostics/Troubleshooting	_____ %
Suspension frames and steering	_____ %	Estimating	_____ %
Braking systems	_____ %	Accessories	_____ %
Automatic transmissions	_____ %	Other (specify)	
Standard transmissions/Clutch assemblies	_____ %	_____	_____ %
Differentials/Final drive assemblies	_____ %		
			Total (should equal 100%): _____ %

Indicate the type of equipment and the type of work this person was involved with during this time period:

(If more space is required, continue on the reverse side.)

PRINT NAME OF COMPANY REPRESENTATIVE

POSITION OF COMPANY REPRESENTATIVE

SIGNATURE OF COMPANY REPRESENTATIVE

YYYY/MM/DD

DATE

SIGNATURE OF EMPLOYEE

YYYY/MM/DD

DATE

We are collecting this personal information to verify and determine the applicant's trade experience towards their apprenticeship agreement in accordance with the *Apprentice Training Act* and the *Apprentice Training and Tradesperson's Qualifications Regulation*. This personal information is being collected under the authority of the *Access to Information and Protection of Privacy Act* s.15(a) and (c)(i). If you have any questions, please call 867-667-5298, or toll-free within Yukon 1-800-661-0408 ext. 5298, or email apprenticeship@yukon.ca.