

## TRADE EXPERIENCE VERIFICATION COOK

Date	Employer				
YYYY/MM/DD					
Address			City	Territory/Province	Postal code
Phone Fax		Email			
This is to verify that					has worked as
. 0 . 1 (		PRINT NAME			
a Cook from	,	to	MONTH D	, for a tota AY YEAR	ıl of
hours spending the following	ng percentage of t				
Vegetable cooking			Baking, pastry and desserts %		
Meat and poultry cooking9			Elementary kitchen management %		
Seafood cooking		%	Egg and breakfast cooking %		
Stocks, sauces and soups			Safety, sanitation and equipment %		
Cutting meat, poultry and seafood			Other (specify)		
Cold kitchen preparation					%
			Total (should equal 100%): %		
Indicate the type of equipm	nent and the type o	of work this per	son was involved v	vith during this time perio	d:
(If more space is required, continu	ne on the reverse side.)				
PRINT NAME OF COMPANY REPRESENTATIVE			POSITION OF COMPANY REP	RESENTATIVE	
SIGNATURE OF COMPANY REPRESENTATIVE			YYYY/MM/DD DATE		
			YYYY/MM/D	D	
SIGNATI IRE OF EMPLOYEE			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.

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