

Trade Qualification Program (Application to Qualify to Write the Trade Examination)

All applicants must be referred by a representative of the Apprenticeship Training and Skill Development Division. Before applying, you must contact the Division to schedule an interview to discuss certification options and eligibility requirements.

Please Print

1. Trade	Registration (200#)
Name of the trade in which you are applying to write the trade examination. Alarm & Security Technician	Training Officer Don Adams

2. Personal Information			
Last Name	Former Last Name (if applicable)		
First Name	Middle Name (no initials)		
Social Insurance Number	Date of Birth (Year/Month/Day)	Gender	M <input type="checkbox"/> F <input type="checkbox"/>
Home Mailing Address	Apt. No.	E-Mail Address	
City/Town	Province/State	Postal Code/Zip	Country
Home Telephone No.	Business Telephone No.	Cellular Phone No.	

Have you applied to write the trade examination in this trade in any other Canadian Province or Territory?

Yes No

If yes, date of application: _____ Prov/Terr where application was made: _____

Were you ever a registered apprentice in this trade in any other Canadian Province or Territory?

Yes No

If yes, date of apprenticeship: _____ Prov/Terr where apprenticeship was registered: _____

Are you presently working in this trade Yes No

The Department will hold all personal information provided in confidence

3. Education and Training

Describe any certificates, credentials or documents you hold in the trade. If you need more space, put the additional information on a separate page. Attach a copy of each certificate, credential or document to your application. If you are not eligible under the Trade Qualification Program this information may also help to determine your placement in another program.

What is the highest level of education you completed?

Certificate/ Credential

What is the name of the trade on the certificate?

What is the name of the province/territory/state and country that issued it?

Does this certificate recognize you as a certified skilled tradesperson?

Yes No

Certificate Number

Date Issued (Year/Month/Day)

Did you complete an Apprenticeship Program?

Yes No

Program Start Date
(Year/Month/Day)

Program Completion Date
(Year/Month/Day)

4. Relevant Training

Describe any training programs or training courses you completed in the trade or any other relevant designated trade. If you need more space, put the additional information on a separate page. Attach relevant copies of certificates, program outlines, transcripts etc., for assessment.

Course or Program Name:

Date Completed

Degree/Diploma/Certificate

University/College/Technical Institute/Awarding Body

Location

Business Phone #

Course or Program Name

Date Completed:

Degree/Diploma/Certificate

University/College/Technical Institute/Awarding Body

Location

Business Phone #

Course or Program Name

Date Completed:

Degree/Diploma/Certificate

University/College/Technical Institute/Awarding Body

Location

Business Phone #

6. References - To fulfill the reference requirement, your references must provide detailed contact information and sign the declaration of support. You may attach an original letter (signed and on company letterhead if applicable) for each reference in lieu of this form.

Reference # 1

Last Name		Former Last Name (if applicable)	
First Name		Middle Name (no initials)	
Home Mailing Address		Apt. #	City/Town
Province/State	Country	Postal Code	Email
Home Telephone Number	Business Telephone Number		Cellular Phone Number
Trade	Certificate of Qualification #		Date of Birth (yy/mm/dd)
Date Issued	Province/Territory Issued		

If **not** a Certificate of Qualification holder, describe your experience in the trade.

Position (Title)	Describe your working relationship with the applicant.(e.g. supervisor, co-worker, employer)
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Declaration

I have seen a copy of the trade regulations and I believe _____ has the trade skills and is operating at a journeyman level. In my opinion he/she should be given the opportunity to write the trade certification examination.

(Applicant's name)

Signature:	Date (Year / Month / Day)
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7. References - To fulfill the reference requirement, your references must provide detailed contact information and sign the declaration of support. You may attach an original letter (signed and on company letterhead if applicable) for each reference in lieu of this form.

Reference # 2

Last Name		Former Last Name (if applicable)	
First Name		Middle Name (no initials)	
Home Mailing Address		Apt. #	City/Town
Province/State	Country	Postal Code	Email
Home Telephone Number	Business Telephone Number		Cellular Phone Number
Trade	Certificate of Qualification #		Date of Birth (yy/mm/dd)
Date Issued	Province/Territory Issued		

If **not** a Certificate of Qualification holder, describe your experience in the trade.

Position (Title)	Describe your working relationship with the applicant.(e.g. supervisor, co-worker, employer)
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Declaration

I have seen a copy of the trade regulations and I believe _____ has the trade skills and
(Applicant's name)
 is operating at a journeyman level. In my opinion he/she should be given the opportunity to write the trade certification examination.

Signature:

Date (Year / Month / Day)

8. Declaration

Please sign and date to confirm/consent to the following:

1. The information I have provided is true and complete in all respects and I have not withheld any relevant information (Note: It is an offence under the *Apprenticeship and Trades Qualification Act* to provide false information.)
2. I have reviewed the National Occupational Analysis and believe I am competent in the tasks of trade.
3. I consent to the verification of this information and any attached documentation.

Signature of Applicant: _____ Date: _____
(Year/Month/Day)

If the application is complete and meets the criteria you will be given an examination application, schedule and guidelines. Submit this application, the exam application and the fee to the Apprenticeship Training and Skill Development division office. The trade examination must be scheduled within ninety (90) days of notice of approval and payment of fee.

9. Industrial Training and Certification Officer

▶ Time in the trade meets the requirements and has been confirmed by employers' letters
Yes No

▶ Letters from the two references recommend the client and are from valid sources.
Yes No

▶ Relevant training information is included and documents are attached (if applicable)
Yes No

▶ Temporary permit required.
Yes No

Application Complete: Yes No If not complete, provide reason(s):

Comments:

Signature of Training Officer: _____ Date : _____

Method of Payment: Certified/Business Cheque Money Order Visa Master Card Debit Card Cash

(credit card account number)

(card holder's name)

(expiry date)

(signature)

- Please enclose your fee payable to the MINISTER OF FINANCE in the amount of \$654.86 and forward completed application to the address above. **Personal cheques are not accepted and will be returned.**
- **Debit** and **Credit** payments are accepted in Halifax, Sydney and Truro Offices.
- **DO NOT MAIL CASH** - cash payment is accepted in the Halifax location with exact change only.