

CABINETMAKER

The work experiences on this form are for credit only and must have been performed prior to your registration as an apprentice.

Name: _____
Surname First Initial

Address: _____/_____/_____/_____
P. O. Box/Street City/Town Province Postal Code

Telephone: (____) _____ **Cell:** (____) _____ **Email address:** _____

Note to Employer

By completing the section below you are confirming that the hours indicated for the applicant are specific to employment in the **Cabinetmaker Trade**.

Verified By: _____ *** CRA Business #:** _____ (9 digits)

Company Name

Address: _____ / _____ / _____ / _____

P. O. Box/Street City/Town Province Postal Code

Telephone: (_____) _____ **Email Address:** _____

Employer or Representative Signature Employer or Representative (Print)

Date of applicant's employment from: ____ / ____ / ____ **to:** ____ / ____ / ____

M D Y M D Y

Total hours of employment the applicant worked in the Cabinetmaker Trade: _____ Hours

*** CRA - Canada Revenue Agency**

Please check the appropriate box:

Trade Qualifiers <input type="checkbox"/>	The signature of the Journeyperson following each of the required skills acknowledges the applicant has met the competencies in each of the skill areas according to the Industry Standard associated with this trade.
Pre- Apprenticeship Credits <input type="checkbox"/>	The signature of the Journeyperson following each of the required skills acknowledges the applicant has performed in each of the skill areas appropriate for this trade.

- The Advisory Committee in the **Cabinetmaker Trade** has identified the work experiences or skills listed below as those required for the trade.
- Journeypersons must be certified in the trade stated by this document. A Journeyperson in another trade may sign certain sections if the skills are common to both trades.

Workplace Skills Required For Certification	JOURNEYPERSON SIGNATURE	VERIFIED BY APPLICANT
COMMON OCCUPATIONAL SKILLS		
Maintain safe work environment		
Use PPE		
Maintain hand, portable and pneumatic tools		
Maintain stationary power tools		
Maintain automated and CNC equipment		
Maintain finishing equipment		
Interpret prints and drawings		
Plan projects		
Creates design		
Perform layout of cabinets, furniture and architectural millwork		
Fabricate jigs and templates		
Dry fit components		

Workplace Skills Required For Certification	JOURNEYPerson SIGNATURE	VERIFIED BY APPLICANT
Select hardware, adhesives and fasteners		
MACHINING COMPONENTS		
Break out, dress, and shape solid woods		
Break out and machine sheet materials		
Machine joints		
Performs preliminary sanding		
Sets up and operates automated and CNC equipment		
FORMING AND LAMINATING		
Build forms		
Perform curved laminating		
Arrange materials		
Apply adhesives & clamps		
INSTALL VENEERS AND LAMINATES		
Prepare and adhere veneer to substrate		
Prepare and adhere laminate sheets to substrates		
Perform final cleanup		
SHOP ASSEMBLY APPLICATION		
Assemble cabinets & furniture		
Combine components into final assemblies		
Assemble architectural millwork components		
Assemble architectural fixtures		

Workplace Skills Required For Certification	JOURNEYPerson SIGNATURE	VERIFIED BY APPLICANT
PERFORM FINISHING		
Repair minor imperfections		
Prepares parts for finishing and performs final surface sanding		
Prepare & apply finishing materials manually		
Prepare & spray on finishing materials		
ON SITE ASSEMBLY AND INSTALLATION		
Scribes product to fit on site		
Performs final on-site assembly and fastening of cabinets and countertops		
Performs final on-site assembly and fastening of architectural millwork products		
Installs mouldings		
SPECIALIZED OPERATIONS		
Layout, machine, assemble and install stair and balustrade components		
Break out, fabricate and install solid surface materials		

Note to Journeypersons

- Journeypersons who have applied their signatures to the skills required for the certification section of this document must complete the following sections.
- The Apprenticeship and Trades Certification Division, for the purpose of verification, may contact Journeypersons who have applied their signatures to skills for applicants.

Journeyperson Supervisor Verification

Name: _____
Surname First Initial

Address: _____/_____/_____/_____
P. O. Box/Street City/Town Province Postal Code

Telephone: (____) _____ Cell phone: (____) _____

E-mail address: _____

Certificate Number: _____ and/or I.P. Number: _____

Name (signature): _____

Journeyperson Supervisor Verification

Name: _____
Surname First Initial

Address: _____/_____/_____/_____
P. O. Box/Street City/Town Province Postal Code

Telephone: (____) _____ Cell phone: (____) _____

E-mail: _____

Certificate Number: _____ and/or I.P. Number: _____

Name (signature): _____

For Office Use Only

Credit: _____

Approved by: _____ Date: _____
Month / day / year

Note To Trade Qualifier Applicants

If employer verification is not possible, please contact the nearest
Apprenticeship and Trades Certification Office to discuss available options.

Contact Information

Avalon	Clarenville	Central	Western	Labrador
Apprenticeship and Trades Certification Division Industrial Training Section 1170 Topsail Road P.O. Box 8700 St. John's, NL A1B 4J6 Phone: (709) 729-2729 Fax: (709) 729-5878 Toll Free: 1-877-771-3737	Apprenticeship and Trades Certification Division Industrial Training Section 45 Tilley's Road Clarenville, NL A5A 1Z4 Phone: (709) 466-3982 Fax: (709) 466-3987 Toll Free: 1-877-771-3737	Apprenticeship and Trades Certification Division Industrial Training Section 42 Hardy Avenue Grand Falls-Windsor, NL A2A 2J9 Phone: (709) 292-4215 Fax: (709) 292-4502 Toll Free: 1-877-771-3737	Apprenticeship and Trades Certification Division Industrial Training Section 1-3 Union Street Aylward Building, 2nd Floor P.O. Box 2006 Corner Brook, NL A2H 6J8 Phone: (709) 637-2366 Fax: (709) 637-2519 Toll Free: 1-877-771-3737	Apprenticeship and Trades Certification Division Industrial Training Section 163 Hamilton River Road Bursey Building P.O. Box 3014, Station "B" Happy Valley-Goose Bay, NL A0P 1E0 Phone: (709) 896-6348 Fax: (709) 896-6703 Toll Free: 1-877-771-3737

The personal information in this form is being collected under the authority of section 61(c) of the **Access to Information and Protection of Privacy Act, 2015** for the purpose of verifying work experience for apprenticeship credit. If you have any questions about the collection, use and disclosure of your personal information, please contact an Apprenticeship Program Officer at one of ATCD's regional offices, or email app@gov.nl.ca.