

**Record of Work Experiences  
Trade Qualifier or Pre-Apprenticeship Credits**

**IRONWORKER (REINFORCING)**

**Note to Apprenticeship Applicants**

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

**Applicant Information**

**Name:** \_\_\_\_\_  
Surname First Initial

**Address:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
P. O. Box/Street City/Town Province Postal Code

**Telephone:** (\_\_\_\_) \_\_\_\_\_ **Cell:** (\_\_\_\_) \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Employer Information & Verification**

**Note to Employer**

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

**Verified By:** \_\_\_\_\_ **CRA\* Business #:** \_\_\_\_\_  
Company Name 9 digits

**Address:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
P. O. Box/Street City/Town Province Postal Code

**Telephone:** (\_\_\_\_) \_\_\_\_\_ **Email Address:** \_\_\_\_\_  
Employer or Representative

\_\_\_\_\_  
Employer or Representative Signature

\_\_\_\_\_  
Employer or Representative (Print)

**Date of applicant's employment from:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **to:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Month Day Year

Total hours of employment the applicant worked in the **Ironworker (Reinforcing) Trade:** \_\_\_\_\_ Hours

\* CRA - Canada Revenue Agency

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.

- The Advisory Committee in the **Ironworker (Reinforcing) 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.

Skills Required For Certification	Journeyperson Signature	Verified By Applicant
<b>OCCUPATIONAL SKILLS</b>		
Interprets drawings and specifications		
Interprets standards, regulations and procedures		
Communicates with co-workers		
Communicates with other disciplines		
Communicates with apprentices		
Uses hand signals		
Communicates electronically		
Uses hand tools		
Uses power tools		
Uses bending tools and equipment		
Uses powder-actuated tools		
Uses aerial work platforms		
Uses ladders		
Uses scaffolding		
Uses personal protective equipment		
Uses surveying equipment		
Uses welding equipment		

Skills Required For Certification	Journeyperson Signature	Verified By Applicant
Uses thermal and oxy-fuel cutting equipment		
Organizes materials and supplies		
Marks layouts		
Maintains safe work environment		
Assesses site hazards		
Plans work tasks		
<b>RIGGING AND HOISTING</b>		
Matches load to lift capacity		
Inspects rigging equipment		
Maintains rigging equipment		
Uses hoisting equipment		
Uses lifting equipment		
Attaches rigging to load		
<b>CRANES</b>		
Assesses site hazards		
Determines crane position		
Prepares bases		
Erects cranes		
Disassembles crane components		
Prepares crane for transport		
<b>REINFORCING</b>		
Cuts material		
Bends material		
Places reinforcing material		
Ties material		

Skills Required For Certification	Journey person Signature	Verified By Applicant
Joins material		
<b>PRE-STRESSES/POST-TENSIONS</b>		
Lays out profile		
Places tendons and accessories		
Installs bursting and steel anchorages		
Connects tendons to anchors		
Protects exposed tendons		
Sets up stressing equipment		
Tensions tendons		
Cuts and caps tendons		
Removes stressing equipment		
De-stresses tendons		
Sets up grouting equipment		
Installs grouts		

## 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: (\_\_\_\_) \_\_\_\_\_

Email 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

<b>Avalon</b>	<b>Clareville</b>	<b>Central</b>	<b>Western</b>	<b>Labrador</b>
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 Clareville, 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, 2 <sup>nd</sup> 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](mailto:app@gov.nl.ca).