



BAKER
 CANADA
**STATUTORY DECLARATION
 OF WORK EXPERIENCE**

ITA Customer Service
 800 – 8100 Granville Ave.
 Richmond, BC V6Y 3T6
 Tel: 778-328-8700
 Fax: 778-328-8701
 Toll Free: 1-866-660-6011
 customerservice@itabc.ca

To qualify to challenge certification in this trade or be granted authority to supervise and sign-off on apprentices in this trade, individuals must have:

- worked a minimum of **8,100 hours** performing the tasks listed in Section E, and
- experience performing at least **70%** of the job tasks listed in Section E

A Statutory Declaration of Work Experience is used to declare work experience for periods during which you were self-employed or a previous employer is unavailable to complete an Employer Declaration. Please note that unless your work experience hours were gained through self-employment, Certification Challenge and Supervision and Sign-Off Authority applications will not be accepted if they are only accompanied by a Statutory Declaration. Non-self-employed applicants must provide an Employer Declaration from at least one employer who can verify work experience. For more information, see **Instructions for Certification Challenge or Supervision and Sign-off Authority**.

The information provided on this form is used to assess and to validate your work experience in this trade.

A. Applicant Name

Legal First Name:	Legal Middle Name(s):	Legal Last Name:

B. Supervisor or Self-Employment Contact Information

Enter the contact information for the Supervisor at your previous employer who is unavailable to complete an Employer Declaration, or for your own business if you are self-employed.

Name of Organization/Employer/Business:		Supervisor Name:		Supervisor's Position/Title:	
Suite Number:	Street Number and Name:				
City:		Province:		Postal Code:	
Telephone Number: ()		Email Address:		Business Registration Number: (Self-Employment only)	

C. Employment or Self-Employment Information of Applicant

Enter the dates and number of hours for this period of employment or self-employment. Combine multiple periods of self-employment on one form, but separate periods of employment with different employers on separate forms.

Dates of Employment (MM/DD/YYYY):		Total Number Hours of Baker Experience Accumulated in that Period:
From:	To:	
Job Title of Applicant:		



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D. Reason for Statutory Declaration

Indicate why a Statutory Declaration is required for this period of employment:

- Applicant was self-employed Employer will not complete Employer Declaration
- Employer is no longer in business Employment records are not available

Applicants must attempt to contact current or previous employers to request an Employer Declaration. If you have been unable to obtain an Employer Declaration for any portion of your non-self-employed work experience, indicate the steps you have taken to try to obtain it. If sufficient evidence of steps taken is not provided, the application may not be approved.

E. Statutory Declaration of Job Task Performance

By checking the appropriate columns in the Declaration Response column, indicate whether or not you have performed the job tasks listed below. Cross out any job tasks you did not perform during the period indicated in Section C.

By checking in the appropriate columns, indicate how frequently you have performed the job tasks listed below.	Frequently	Occasionally	Never
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A Occupational Skills

Practice personal hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice safe work habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Store and handle perishable products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice good housekeeping and clean work habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handle and clean baking equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Describe baking materials, ingredients, scientific principles and terminology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost bakery products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Apply communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Apply inventory control procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Apply principles of bakery merchandizing and retail sales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Describe principle of production flow and layout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use health and nutritional information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Enter the applicant name (repeat on every page of this form).

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
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By checking in the appropriate columns, indicate how frequently you have performed the job tasks listed below.	Frequently	Occasionally	Never
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B Breads and Rolls

- Prepare and bake basic bread and rolls
- Prepare and bake specialty breads and rolls
- Prepare, process and bake artisan and sourdough breads and rolls

C Sweet Yeast Products

- Prepare and bake sweet dough products
- Prepare and bake Danish pastries
- Prepare and deep fry yeast doughnuts, cake doughnuts and French crullers
- Prepare and bake croissants
- Prepare and bake specialty sweet fancy breads and rolls

D Cookies

- Prepare and bake slices and squares
- Prepare and bake various cookies

E Cakes

- Prepare, bake and finish cakes
- Prepare, bake and finish loaf cakes and quick breads
- Prepare, bake and finish cheese cakes
- Prepare, bake and finish fruit and specialty cakes

F Pies, Puff and Pastry Doughs

- Prepare and bake pie dough and products
- Prepare basic and quick puff paste
- Prepare and bake sweet paste products
- Prepare, bake, fill and glaze choux paste
- Prepare and bake specialty pastry products
- Prepare and bake savoury products

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By checking in the appropriate columns, indicate how frequently you have performed the job tasks listed below.

	Frequently	Occasionally	Never
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- G Assemble, Ice and Decorate Cakes, French Pastries and Petit Fours**
- Prepare fillings, icings, creams, sauces, glazes and garnishes
 - Cut, fill, mask, decorate and finish dessert and birthday cakes
 - Prepare French pastries and petit fours
 - Design and decorate wedding cakes
 - Prepare, mould and decorate marzipan
- H Chocolate and Sugar Work**
- Prepare and process chocolate in various applications
 - Prepare and boil sugar for various applications
- I Fruit, Ice Cream and Specialty Desserts**
- Prepare fruit desserts
 - Prepare ice cream and specialty desserts
 - Prepare mousses
 - Prepare custards
 - Design and prepare plated desserts

F. Confirmation of Prerequisite Credentials or Certificates

For some trades, evidence that the applicant has earned prerequisite credentials or certificates is required before the individual is permitted to challenge certification or receive Supervision and Sign-Off Authority. For those trades, you must prove you have the required prerequisite credentials.

I declare that I have attained the prerequisite credentials or certification required to be considered eligible to challenge or receive Supervision and Sign-off Authority in this trade:

- FOODSAFE Level 1 certificate OR equivalent - Must be VALID Copy of certificate attached

G. Applicant Signature

I certify that the information I have provided is accurate. (Note: Collection and protection of personal information on this form is in accordance with the provisions of the Freedom of Information and Protection of Privacy Act.)

Applicant Name (please print):	Applicant Signature:	Date: (MM/DD/YYYY)
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Enter the applicant name (repeat on every page of this form).

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H. References

References must accompany all Statutory Declarations. Include with your completed Statutory Declaration the names and contact information of three individuals who can verify your self-declared work experience in this trade. This may include suppliers (maximum one), former employees (maximum one), contractors, or regular, long-term clients (maximum one).

Each individual listed will be contacted by the Industry Training Organization (ITO) responsible for this trade or ITA to verify the information provided on your application.

1. Reference

Legal Last Name of Reference:	Legal First Name of Reference:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:

2. Reference

Legal Last Name of Reference:	Legal First Name of Reference:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:

3. Reference

Legal Last Name of Reference:	Legal First Name of Reference:
Organization/Business Name:	Position/Title:
Business Phone Number:	Reference Cell Number:
Relationship to Applicant:	Email Address:

Enter the applicant name (repeat on every page of this form).

Legal First Name:	Legal Middle Name(s):	Legal Last Name:
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