



LOCKSMITH EMPLOYER DECLARATION OF WORK EXPERIENCE

ITA Customer Service
800 – 8100 Granville Ave.
Richmond, BC V6Y 3T6
Tel: 778-328-8700
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Toll Free: 1-866-660-6011
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D. Supervisor Declaration of Job Task Performance

By checking “Yes” or “No” in the Declaration Response column, indicate whether or not you, as the direct supervisor of the applicant, have personally witnessed the applicant performing the job tasks listed. Cross out any job tasks you did not see the applicant perform.

Job Tasks	Declaration Response
Use Safe Work Practices <i>Includes:</i> demonstrate workplace safety, Use WHMIS, Practice Fire Prevention	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Organize Work <i>Includes:</i> Explain the locksmith trade, interprets blueprints, applies codes and regulations, performs material handling, performs customer sales and services, performs security consultation	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Use Tools and Equipment <i>Includes:</i> Uses hand tools, uses power tools, uses key-cutting equipment, can describe welding	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Create Keys <i>Includes:</i> Duplicates keys, originates keys	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Install and Service Locks <i>Includes:</i> installs, repair and service locks, can open secured entry, installs and services high security hardware, services automotive locks, installs and services safes, vaults and safe deposit boxes.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Install Hardware <i>Includes:</i> repair doors and frames, installs door closers, installs panic hardware, and services other hardware.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Install Electrical and Electronic Components and Hardware <i>Includes:</i> describes electrical and electronic theory, installs access controls, repairs and installs electrical and electronic hardware, tests and commission electrical and electronic installations	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Develop Master Key Systems <i>Includes:</i> plan master key systems, generates bitting list and pinning charts, master key cylinders, maintain accurate records.	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

E. 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. For those trades, a current or previous employer must verify that the applicant has the required prerequisite credentials.

There are no prerequisite credentials or certificates for this trade.

Enter the Supervisor and Applicant names from Page 1 on every page of this form

Supervisor First and Last Name:	Applicant First and Last Name:
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F. Supervisor Signature

I certify that the information I, as the current or former direct supervisor of the applicant, 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.)

Supervisor name (Please Print):	Supervisor Signature:	Date Signed: (MM/DD/YYYY)

Enter the Supervisor and Applicant names from Page 1 on every page of this form

Supervisor First and Last Name:	Applicant First and Last Name: