

YOUR TRADE NEEDS YOU

ATCD is seeking people who are **Red Seal Certified** and interested in:

- giving back to their trade;
- helping to maintain high quality apprenticeship standards;
- helping apprentices gain certification, mobility and flexibility through apprenticeship training; and
- lending their expertise and enthusiasm to their trade

Specifically, **we need:**

Provincial Trade Advisory Committee (PTAC) Members

PTAC members provide their expert knowledge and guidance to the Provincial Apprenticeship and Certification Board (PACB) on matters pertaining to their trade, including:

- reviewing and developing curriculum standards, training tool and equipment lists, and apprenticeship logbooks;
- validating Provincial/Atlantic/Interprovincial Examinations;
- validating Atlantic and National Occupational Standards;
- other issues as requested by the PACB.

Program Accreditation Team Members

Program Accreditation is an independent audit of trade training programs to ensure they meet established standards and produce competent graduates. Accreditation team members review:

- lesson plans and student work to ensure educational standards are met;
- the site facilities to confirm that they meet accreditation standards;
- tools and expendable materials to verify that students have satisfactory “hands-on” learning experiences; and
- equipment to ensure it is sufficient for the appropriate hours of practical training each student requires.

Examination Committee Members

An Examination Committee assists in the development and validation of provincial level examinations. For some trades (hairstylist, welder, machinist and cook) they also assist in the design and administration of practical examinations to assess an individual’s practical, hands-on skills in a broad cross section of the occupation.

If interested in participating in one of the above-noted committees, please complete the enclosed application and return to:

Government of Newfoundland and Labrador
Apprenticeship and Trades Certification Division
45 Tilley’s Rd, Clarenville, NL A5A 1Z4
or fax to: 466-3987

For more information visit: www.gov.nl.ca/app

ADVISORY/EXAM COMMITTEE AND ACCREDITATION TEAM APPLICATION FORM

Personal Information									
First Name:			Last Name:						
Mailing Address:			City/Town:						
Postal Code:		Cell Phone #:		Home Phone #:					
Email:				French Language: Yes <input type="checkbox"/> No <input type="checkbox"/>					
Trade:			JP Certificate Number:						
Committee applying for (can select more than one):									
<input type="checkbox"/> Provincial Trade Advisory Committee (choose one position from the four below) <table style="width: 100%; margin-left: 20px;"> <tr> <td><input type="checkbox"/> Employer Representative</td> <td><input type="checkbox"/> Public College Representative</td> </tr> <tr> <td><input type="checkbox"/> Employee Representative</td> <td><input type="checkbox"/> Private College Representative</td> </tr> </table>						<input type="checkbox"/> Employer Representative	<input type="checkbox"/> Public College Representative	<input type="checkbox"/> Employee Representative	<input type="checkbox"/> Private College Representative
<input type="checkbox"/> Employer Representative	<input type="checkbox"/> Public College Representative								
<input type="checkbox"/> Employee Representative	<input type="checkbox"/> Private College Representative								
<input type="checkbox"/> Examination Committee									
<input type="checkbox"/> Program Accreditation Team									
Employment Information									
Employment Status : <input type="checkbox"/> employee <input type="checkbox"/> employer / manager <input type="checkbox"/> self-employed <input type="checkbox"/> instructor <input type="checkbox"/> retired									
What is your job title?									
Business Name:									
Mailing Address:				Postal Code:					
Work Phone #:			Cell Phone #:						
Email address:									
Are you working "on the tools"?		When receiving mail, which address do you want used?		Do you have the support of your employer to serve as a committee member?					
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Home <input type="checkbox"/> Work		<input type="checkbox"/> Yes <input type="checkbox"/> No					
Trade Experience									
Total years worked in the trade: _____			Accumulated experience for each category below (if applicable)						
Industrial	Residential	Commercial	Maintenance	Instructor	Other				
____ Years	____ Years	____ Years	____ Years	____ Years	____ Years				
Declaration									
I declare that, to the best of my knowledge, the information provided in this application is true and complete in all respects and that I have not withheld any relevant information. I authorize the Apprenticeship & Trades Certification Division, Standards and Curriculum Section to contact individuals as required to verify my certification and / or work experience. Information collected is protected by the provisions of the <i>Access to Information and Protection of Privacy Act (2002)</i> .									
Signature of applicant:				Date:					

- Divisional staff will make contact with the applicant to verify eligibility for membership, review the roles and responsibilities of the Committee, and confirm interest.
- Appointments are for a three-year term and may be renewed.
- Names of all screened and approved applicants are kept in a database for future consideration.