Department of Immigration, Population Growth and Skills Apprenticeship and Trades Certification Division

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

#### **BRICKLAYER**

## **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**

| Surname                                                                                                                                                             | First                            | Initial                |               |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------------------|---------------|--|--|
| Address:                                                                                                                                                            |                                  | /                      | /             |  |  |
| Address:P. O. Box/Street                                                                                                                                            | City/Town                        | Province               | Postal Code   |  |  |
| Telephone: () Cell: (                                                                                                                                               | ) En                             | nail 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 Bricklayer Trade. |                                  |                        |               |  |  |
| Verified By:                                                                                                                                                        | CI                               | RA* Business #         |               |  |  |
| Company Name                                                                                                                                                        |                                  |                        | 9 digits      |  |  |
| Address:                                                                                                                                                            | J                                |                        |               |  |  |
| P. O. Box/Street                                                                                                                                                    | City/Town                        | Province               | Postal Code   |  |  |
| Telephone: ()                                                                                                                                                       | Email Address:                   |                        |               |  |  |
|                                                                                                                                                                     |                                  | Employer or Represe    |               |  |  |
|                                                                                                                                                                     |                                  |                        |               |  |  |
| Employer or Representative Signature                                                                                                                                |                                  | Employer or Representa | ative (Print) |  |  |
| Date of applicant's employment from:<br>Month                                                                                                                       | / / to: /<br>n Day Year Month Da |                        |               |  |  |
| Total hours of employment the applica                                                                                                                               | nt worked in the <b>Bricklay</b> | er Trade:              | Hours         |  |  |
| * CRA - Canada Revenue Agency                                                                                                                                       |                                  |                        |               |  |  |

## Please check the appropriate box:

| Trade Qualifiers               | The <b>signature of the Journeyperson</b> 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<br>Credits | The <b>signature of the Journeyperson</b> 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 **Bricklayer 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 |
|----------------------------------------------------------------|-------------------------|-----------------------|
| Maintains safe work environment.                               |                         |                       |
| Uses personal protective equipment (PPE) and safety equipment. |                         |                       |
| Maintains tools and equipment.                                 |                         |                       |
| Uses rigging, hoisting and lifting equipment.                  |                         |                       |
| Erects scaffolding.                                            |                         |                       |
| Dismantles scaffolding.                                        |                         |                       |
| Maintains scaffolding.                                         |                         |                       |
| Uses drawings, blueprints and specifications.                  |                         |                       |
| Plans daily tasks and activities.                              |                         |                       |
| Prepares vertical substrates and foundations.                  |                         |                       |
| Applies parging.                                               |                         |                       |
| Applies anchoring/tie systems.                                 |                         |                       |
| Installs membrane and flashing.                                |                         |                       |
| Installs insulation.                                           |                         |                       |
| Lays out wall and coursing.                                    |                         |                       |
| Finishes joints.                                               |                         |                       |
| Cleans new masonry surfaces.                                   |                         |                       |
| Seals masonry surfaces.                                        |                         |                       |
| Mixes mortar, concrete and grout.                              |                         |                       |

| Skills Required For Certification                    | Journeyperson Signature | Verified By Applicant |
|------------------------------------------------------|-------------------------|-----------------------|
| Uses mortar.                                         |                         |                       |
| Uses concrete and grout.                             |                         |                       |
| Uses adhesives.                                      |                         |                       |
| Builds non-load-bearing walls.                       |                         |                       |
| Protects surrounding areas.                          |                         |                       |
| Builds load-bearing walls.                           |                         |                       |
| Prepares substrate for surface-bonded masonry units. |                         |                       |
| Applies surface-bonded masonry units.                |                         |                       |
| Prepares stone.                                      |                         |                       |
| Lays stone.                                          |                         |                       |
| Damp cures walls.                                    |                         |                       |
| Prepares substrate for cladding.                     |                         |                       |
| Prepares stone for cladding.                         |                         |                       |
| Installs stones.                                     |                         |                       |
| Disassembles unit masonry.                           |                         |                       |
| Prepares restoration work area.                      |                         |                       |
| Reinstalls masonry and accessories.                  |                         |                       |
| Removes deteriorated components.                     |                         |                       |
| Repoints joints.                                     |                         |                       |
| Repairs masonry units.                               |                         |                       |
| Reinstalls masonry units and accessories.            |                         |                       |
| Prepares surfaces.                                   |                         |                       |
| Cleans existing masonry surfaces.                    |                         |                       |
| Prepares job site and materials.                     |                         |                       |
| Prepares horizontal substrate.                       |                         |                       |
| Lays masonry units on horizontal.                    |                         |                       |
| Lays masonry units to build chimneys.                |                         |                       |
| Installs flue lining.                                |                         |                       |
| Installs related flashings.                          |                         |                       |
| Installs caps.                                       |                         |                       |

| Skills Required For Certification       | Journeyperson Signature | Verified By Applicant |
|-----------------------------------------|-------------------------|-----------------------|
| Prepares existing fireplace for insert. |                         |                       |
| Faces fireplaces and inserts.           |                         |                       |
| Prepares location for arches.           |                         |                       |
| Installs arch masonry units.            |                         |                       |

Skills based upon **2011 National Occupational Analysis** for the **Bricklayer** Trade

## **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          | In       | itial       |  |
| Address:P. O. Box/Street              | /City/Town     | Province | Postal Code |  |
| Telephone: ()                         | Cell phone: () |          |             |  |
| Email address: Certificate Number:    |                |          | _           |  |
| Name (signature):                     |                |          |             |  |

| Journeyperson Supervisor Verification |                |                  |  |
|---------------------------------------|----------------|------------------|--|
| Name:                                 |                |                  |  |
| Surname                               | First          | Initial          |  |
| Address:/                             | J              |                  |  |
| P. O. Box/Street                      | City/Town Prov | ince Postal Code |  |
| Telephone: ()                         | Cell phone: (_ | )                |  |
| Email address:                        |                |                  |  |
| Certificate Number:                   |                |                  |  |
| Name (signature):                     |                |                  |  |
|                                       |                |                  |  |

| For Office Use Only |                     |          |  |
|---------------------|---------------------|----------|--|
|                     | Credit:             |          |  |
| Approved by:        | Date: month / day / | <br>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                    |
|-----------------------------|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| Department of Immigration,  | Department of Immigration,   | Department of Immigration,   | Department of Immigration,              | Department of Immigration,  |
| Population Growth and       | Population Growth and Skills | Population Growth and Skills | Population Growth and Skills            | Population Growth and       |
| Skills                      | Industrial Training Section  | Industrial Training Section  | Industrial Training Section             | Skills                      |
| Industrial Training Section | 45 Tilley's Road             | 42 Harding Avenue            | 1-3 Union Street                        | Industrial Training Section |
| 1170 Topsail Road           | Clarenville, NL A5A 1Z4      | Grand Falls-Windsor, NL      | Aylward Building, 2 <sup>nd</sup> Floor | 163 Hamilton River Road     |
| P.O. Box 8700               | Phone: (709) 466-3982        | A2A 2J9                      | P.O. Box 2006                           | Bursey Building             |
| St. John's, NL A1B 4J6      | Fax: (709) 466-3987          | Phone: (709) 292-4215        | Corner Brook, NL A2H 6J8                | P.O. Box 3014, Station "B"  |
| Phone: (709) 729-2729       | Toll Free: 1-877-771-3737    | Fax: (709) 292-4502          | Phone: (709) 637-2366                   | Happy Valley-Goose Bay, NL  |
| Fax: (709) 729-5878         |                              | Toll Free 1-877-771-3737     | Fax: (709) 637-2519                     | AOP 1EO                     |
| Toll Free: 1-877-771-3737   |                              |                              | Toll Free 1-877-771-3737                | 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.