

For Designated Trainers - Senior Years Apprenticeship Option

Review of Work Experience -Transport Trailer Technician

NOTE: Effective April 1, 2003, all NEW applicants wanting to train as an apprentice in a designated Manitoba apprenticeship trade must work under the supervision of a certified journeyman unless a specific Trade Regulation provides accommodation for an alternate arrangement.

In recognition that the Senior Years Apprenticeship Option (SYAO) requires greater flexibility in its administration, an amendment was made to the General Regulation stating that apprentices registered in the SYAO (except in trades that require compulsory certification), can be supervised by an uncertified journeyman (designated trainer) until **November 1, 2008**. After November 1, 2008, all Senior Years apprentices must be supervised by a certified journeyman.

If you are not a certified journeyman, to participate in the SYAO and to qualify as a designated trainer in this trade, you must have:

- experience in 70 per cent of the tasks of the trade
- at least six years of work experience in the trade within the last ten years

Please provide the following information so we can assess the training and supervision you will be giving your apprentice:

Your Name *Business Phone* *Senior Years Apprentice's Name*

Business Name *Business Mailing Address* *City/Town*

Will you be supervising and training a Senior Years Apprentice? Yes No

Have you worked full-time as a Transport Trailer Technician the last six years? Yes No

Indicate the approximate number of hours you have worked in the last six years _____

In the last ten years, how many years have you worked as a Transport Trailer Technician? _____

Would you consider becoming certified by taking a Trades Qualifications examination? Yes No

Would you like information on qualifying for interprovincial certification through Trades Qualification? Yes No

Would you be interested in participating in certification upgrading courses? Yes No

Please complete the following request outlining your employment history. Use additional paper if required:

Employer (Include Address)	Dates of Employment	Experience (Indicate # months)	Total # Hours

Note: Additional information required on reverse side of page.

Designated Trainer Work Experience Form

Transport Trailer Technician	<i>Percentage of time spent performing this task</i>
<p><i>During the last ten years, what percentage of time have you spent performing the following tasks? Percentages must total 100%.</i></p>	
<ul style="list-style-type: none"> • Brake Systems <i>Includes: servicing standard, air, camshaft, air disc and ABS braking systems.</i> 	%
<ul style="list-style-type: none"> • Work Practices and Procedures <i>Includes: inspecting trailer systems; -interpreting service manuals; -using hand and power tools and measuring equipment; -operating and maintaining welding equipment; -insulating electrical/electronic system faults; and -servicing slider and fixed, air, rubber block, walking beam and spring suspension systems.</i> 	%
<ul style="list-style-type: none"> • Trailer Bodies <i>Includes: performing general trailer and tanker repairs, and -servicing electrical systems.</i> 	%
<ul style="list-style-type: none"> • Coupling Units and Landing Gear <i>Includes: servicing coupling units including fifth wheel, turn tables and hitches; and -servicing landing gear.</i> 	%
<ul style="list-style-type: none"> • Axles, Tires, Wheel Hubs and Rims <i>Includes: servicing axles, wheel hubs, tires and wheel rims.</i> 	%
<ul style="list-style-type: none"> • Hydraulics and Power Take-Off Systems <i>Includes: servicing hydraulic systems and cargo/product pumps and power take-offs.</i> 	%
<ul style="list-style-type: none"> • Cooling and Heating Units <i>Includes: servicing heating and refrigeration units including propane heaters.</i> 	%
<ul style="list-style-type: none"> • Other Tasks <i>Includes: any other tasks that you may have been assigned. If applicable, please identify these tasks and give a percentage of time spent working on them.</i> 	%
Total	100%

I verify that, to the best of my knowledge, the information I am submitting is true and accurate.

Name (please print): _____

Signature: _____ **Date:** _____

If Applicable, Name of Employer (please print): _____

Signature of Employer: _____ **Date:** _____

ATC's Approval Signature

Date

Director, Field Operation's Approval Signature

Date

This personal information is being collected under the authority of *The Apprenticeship and Trades Qualifications – General Regulation* and will be used for the purpose of renewing your authorization to act as a designated trainer in the trade. It will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act*.

Your personal information is protected by the Protection of Privacy provisions of *The Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection or use of your personal information, contact:

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