Apprenticeship
A partnership for industry training

Apprenticeship
Copy of Personal Records

This information is protected by the Protection of Privacy provisions of *The Freedom of Information and Protection of Privacy Act.*

Direct all inquiries or correspondence to:

Apprenticeship Branch
Manitoba Education, Training and Youth
1010-401 York Avenue
Winnipeg MB R3C 0P8
Phone: 945-3337
Fax: 948-2346
Toll free: 1-877-978-7233, extension 3337.

Français au verso.

MG 7463 (Rev. 02/05)

Manitoba

I am applying for a copy of: (Check applicable box(es))

- ❑ Report of Hours
- ❑ Apprentice Pocket Card
- ❑ Apprentice Trade Portfolio
- ❑ Certificate of Qualification wall document*
- ❑ Certificate of Qualification Pocket Card*
- ❑ Practical Experience Record Book

Replacement or revision of records specifically for the trades of Hairstylist, Esthetician and Electrologist

- ❑ Renewable Certificate of Qualification/Authorization to Practice*
- ❑ Pocket Card for Renewable Certificate of Qualification / Authorization To Practice*
- ❑ Temporary Permit
- ❑ Student Permit
- ❑ Limited Practice Permit (Trade of Esthetician)

***STATUTORY DECLARATION BELOW REQUIRED.**

PLEASE PRINT

_____ *Legal First Name* _____ *Middle Initial* _____ *Last Name*

_____ *Home Mailing Address* _____ *City/Town* _____ *Postal Code*

_____ *Social Insurance Number* _____ *Phone Number* _____ *Apprenticeship Registration Number*

_____ *Name of Your Trade*

Apprenticeship Level (If applicable, indicate level)
❑ *1* ❑ *2* ❑ *3* ❑ *4* ❑ *5*

_____ *Signature in Writing* _____ *Date*

Statutory Declaration

Declaration of lost or damaged Certificate of Qualification or Pocket Card

I, _____ do solemnly declare that on or before the
Print Full Legal Name on line above

_____ day of _____ 20 _____ ; my
Print Numerical Date *Print Month above* *Year*

_____ was _____.
Print Journeyperson Certificate of Qualification OR Pocket Card on the above *Print Lost OR Damaged on line above*

I make this declaration believing it to be true, and knowing that it is of the same force and effect as if made under oath and by virtue of the Manitoba Evidence Act.

_____ *Signature in Writing* _____ *Date*

The cost to replace personal apprenticeship information is $35.00 per record and $15.00 per permit. With this application, please include the replacement fee(s) as a cheque or money order payable to ***Minister of Finance***.
A $20.00 service charge is applied to NSF cheques.

Witness of Declaration

A Statutory Declaration must be witnessed and signed. (Individuals whose signatures are recognized as having signing authority include, but are not limited to, a justice of the peace, magistrate, judge, lawyer, postmaster, member of the Royal Canadian Mounted Police, surveyor and notary public. (Consult the Yellow Pages of Manitoba Telephone Directories for a listing of Notaries Public.)

Declaration before me at this _____ day of _____, 20_____.

_____
Signature