Apprenticeship

A partnership for industry training



Work Experience Form - Trades Qualification Nail Technician

This completed Work Experience Form, Employer letter(s), Statutory Declaration, where applicable and appropriate fee must accompany a **Trades Qualification With Examination** application.

A statement of work experience is a letter on company letterhead from your employer(s) covering your work experience during the last ten years and must include:

- exact dates of employment and total hours worked;
- a description of all tasks completed with approximate percentage of time spent in each task area.

Where it is not possible to obtain employer letters due to:

- self employment,
- employer address is unknown, or
- cessation of employer's business

Complete this Work Experience Form and A Statutory Declaration signed by a Notary Public. If you are self-employed, include your full company name, location and registration number.

All documents must be submitted in one of the two official languages.

Fee Schedule

• To apply for a Provincial Certificate of Qualification "With Examination"......\$250.00

Non refundable fees are payable as a cheque or money order to the **Minister of Finance**. A \$20.00 service fee will be applied to all NSF cheques. You can also pay in person by debit card or by credit card.

The following information is required in order to qualify for a Provincial Certificate of Qualification as a Nail Technician through the process of **Trades Qualification With Examination.** Also list professional development activities taken in the last five years and attach copies of verification of course attendance. Please 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.

Fees are collected under *The Apprenticeship and Trades Qualification Act* and its Regulations, and information is used to verify hours and place of employment. The information is protected by the provisions of the *Freedom of Information and Protection of Privacy Act*.

This personal information is being collected under the authority of the *Apprenticeship and Trades Qualifications – General* Regulation for the purposes of verifying the number of hours worked in the trade and place of employment. 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 Freedom of Information and Protection of Privacy* Act. If you have any questions about the collection of personal information on this form, contact:

Apprenticeship Branch

1010-401 York Avenue Winnipeg MB, R3C 0P8, (204) 945-3337 (Phone) 1-877-978-7233 (Toll Free in Manitoba) (204) 948-2346 (Fax)

Work Experience Form

Nail Technician

Taking into account the total number of years you have worked in the trade, what percentage of time have you spent performing the following tasks? Percentages must total 100%.

Percentage of time spent performing this task

Safety and Sanitation Procedures*	0/
Includes: maintaining a safe workplace and sanitizing/disinfecting; and	%
-sterilizing tools and equipment.	
Records Management*	
Includes: completing client information cards; and	%
-maintaining an organized filing system.	
Retail and Salon Management Functions	%
Includes: performing reception duties; and	70
-salon management functions and retail sales.	
Basic Job Skills*	
Includes: consultations;	%
-preparing client for service; and	, ,
-completing service and demonstrating professionalism.	
 Nail Care – Manicures/Pedicures* 	%
Includes: removing nail polish;	70
-soaking, shaping and conditioning cuticles;	
-shaping nails;	
-reducing calluses;	
-massaging limbs; and	
-applying nail polish.	
Nail Care - Nail Repairs*	
Includes: repairing natural nails, artificial nails and/or maintaining artificial nails.	%
Other Tasks	
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.	, ,
- , ,	40007
Total	100%
*Mandatory tasks	
I verify that, to the best of my knowledge, the information I am submitting is true and accurate.	
Name (please print):	

Signature: _____ Date: _____

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NAIL TECHNICIAN PROVINCIAL CERTIFICATION THEORETICAL EXAMINATION TABLE OF CONTENTS

SECTION	TITLE	QUESTIONS	TOTAL
1	Safety and Sanitation	1 – 25	25
2	Records Management	26 – 30	5
3	Retail and Salon Management Functions	31 – 35	5
4	Basic Job Skills	36 – 55	20
5	Nail Care	56 – 100	45
Total Questions			100

- ♦ This is a multiple-choice examination.
- Maximum time allowed for this examination is 3 hours.
- Passing standard is 70%.
- ◆ Table of Contents is subject to change without notice.