

Carpenter

TRADE EXPERIENCE VERIFICATION FORM

Date: _____
Employer: _____
Address: _____
_____ Postal Code _____
Phone: _____ Fax: _____
E-mail: _____

This is to verify that _____ has worked as a **Carpenter**
from (month/year) _____ to (month/year) _____
for a total of _____ hours, spending the following percentage of the time at the tasks
below:

Site Preparation and Foundations	_____ %
Concrete Forms and Placement	_____ %
Framing Floors and Walls	_____ %
Truss Roof Systems and Sheathing	_____ %
Rafter Roof Systems	_____ %
Exterior Finishing	_____ %
Interior Covering and Finishing	_____ %
Stair Building	_____ %
Heavy Timber Construction	_____ %
Other (Please specify)	_____ %
_____	_____ %
_____	_____ %
Total	100 %

Please indicate the type of equipment and the type of work this person was involved with
during this time period: _____

(If more space is required, please add an additional sheet.)

Print name of Company Representative

Position of Company Representative

Signature of Company Representative

Date

Signature of Employee

Date