

- I want to be classified in my apprenticeship and to verify whether I am eligible to take the provincial qualification exam that leads to journeyman status (the candidate must hold an apprentice competency certificate from the Commission de la construction du Québec [CCQ])  
OR
- I only want to verify whether I am eligible to take the provincial qualification exam that leads to journeyman status (the candidate is not required to hold an apprentice competency certificate from the CCQ)  
OR
- I want to verify whether I am eligible for the integration exam (pre-qualification) for apprenticeship in the trade of crane operator  
OR
- I want to have my hours recognized for the renewal of qualification for the shared activity of “boom truck operator”

Please provide the following information, so that we can analyze our file. All fields must be filled in.

1. IDENTIFICATION			
CCQ client no. or social insurance no.			
Last name		First name	
Primary telephone number		Other telephone number	
No.	Street	Apartment no.	
P.O. box	City	Province	Postal code
Aboriginal <input type="checkbox"/> Yes <input type="checkbox"/> No		Trade, specialty, or shared activity for which you want to have your file analyzed	
Personal information (if you do not have a file with the CCQ)			
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of birth (YYYY-MM-DD)	
Height in metres or feet	Eye colour	<input type="checkbox"/> Brown <input type="checkbox"/> Blue <input type="checkbox"/> Hazel <input type="checkbox"/> Green <input type="checkbox"/> Grey <input type="checkbox"/> Black	

2. RECOGNITION OF TRAINING HOURS	
<input type="checkbox"/> I have completed a program of studies in a recognized Québec educational institution. I am supplying my permanent code so that the CCQ can validate my academic record.	Permanent code <sup>1</sup>  You will be granted training credits based on your academic record if you have successfully completed a training program related to your trade or specialty. (No supporting documents needed.)
<input type="checkbox"/> I have successfully completed one or more CCQ upgrading activities. I would like them to be recognized in my apprenticeship.	

<sup>1</sup> The permanent code (composed of four letters followed by eight digits) appears on transcripts, diplomas, and other documents issued by the Ministère de l'Éducation et de l'Enseignement supérieur (MEES) and on various documents issued by educational institutions.

3. DETAILS CONCERNING REQUESTS FOR ELIGIBILITY FOR THE EXAM AND/OR APPRENTICESHIP CLASSIFICATION
For detailed information about the process of having hours recognized, please visit <a href="http://ccq.org">ccq.org</a> .
Please note that all work hours declared to the CCQ through the monthly report are taken into account to determine your experience in the trade or specialty covered by your request.
To have work experience hours recognized, you must provide the following documents:
1. One or more work experience sheets (see this form, below), signed by the person responsible in the company for which you have performed tasks related to your trade or specialty
2. Photocopies of proof of pay for validating each work experience sheet (pay statements, T4 or Relevé 1 tax slips) <sup>2</sup>
<b>Please note that original documents will not be returned to you.</b>
<sup>2</sup> If you have filled out a form for work outside of Québec as part of a reciprocity agreement ( <i>Request for transfer of contributions – Reciprocity Agreement</i> ), you do not need proof of pay for these hours.

#### 4. DETAILS CONCERNING REQUESTS FOR ELIGIBILITY FOR THE EXAM FOR INTEGRATION INTO THE APPRENTICESHIP FOR THE TRADE OF CRANE OPERATOR

For detailed information the process of becoming eligible for the exam for integration into apprenticeship for the trade of crane operator, please visit [ccq.org](http://ccq.org).

To be admitted to this integration exam, you must have your hours worked during your on-the-job training (OTP) plan recognized. You must present photocopies of proof of pay, such as a pay stub, issued by the employer for which you have worked for a minimum of 150 hours during your OTP. You do not have to fill out the work experience sheet attached to this form.

**Please note that original documents will not be returned to you.**

#### 5. DETAILS CONCERNING REQUESTS FOR RECOGNITION OF HOURS FOR THE RENEWAL OF THE QUALIFICATION FOR THE SHARED ACTIVITY “BOOM-TRUCK OPERATOR”

For detailed information concerning this qualification, visit [ccq.org](http://ccq.org).

To renew your qualification, you must present one or more employer letters to prove that you have performed at least 50 hours of work linked to operation of a boom truck with a maximum capacity of 30 tonnes, with a single fixed set of controls, on construction sites covered or not by Act R-20, during the 12 months preceding expiry of this qualification. You do not have to fill out the work experience sheet attached to this form.

The letter(s) must include:

- The employer company's name, address, and telephone number
- Your name and your client number
- The title of the trade or specialty for which the shared activity work was done
- A description of the tasks performed in the shared activity
- The number of hours worked in the shared activity
- The period during which the work was done
- The signature of the company person responsible and his or her function

**Please note that original documents will not be returned to you.**

#### 6. CANDIDATE'S AUTHORIZATION

I declare that all information given above is accurate. I authorize the CCQ to verify the authenticity of the documents that I have submitted with the companies and organizations concerned, including Revenu Québec, the Ministère de l'Éducation et de l'Enseignement supérieur, and school boards, or to validate my academic records for the purpose of issuance of a competency certificate, admission to the provincial qualification examination, recognition of apprenticeship hours, or admission to an upgrading or support activity under the Fonds de formation des salariés de l'industrie de la construction.

For this purpose, I authorize the CCQ to obtain all the information and documents necessary from the companies and organizations concerned, and I consent expressly to allow Revenu Québec to transmit to the CCQ a copy of the Relevé 1 tax slips, “Revenus d'emplois et revenus divers” for each tax return concerned.

This authorization or a copy of it will be valid for the duration of the analysis of my request or for as long as I hold a valid exemption or competency certificate issued or renewed by the CCQ.

\_\_\_\_\_  
Candidate's signature (required)

\_\_\_\_\_  
In witness whereof I have signed, on (YYYY-MM-DD)

#### 7. CANDIDATE'S CONSENT

I understand that the recognition of hours obtained following the present application for an apprentice competency certificate is irreversible and could have an impact on my apprenticeship classification and on my wage rate.

\_\_\_\_\_  
Candidate's signature (required)

\_\_\_\_\_  
In witness whereof I have signed, on (YYYY-MM-DD)

**Please return this form with supporting documents, if applicable, to the following address:**

Commission de la construction du Québec  
Comité d'étude – Dossier salarié  
Case postale 2010, succursale Chabanel  
Montréal (Québec) H2N 0C3

# WORK EXPERIENCE SHEET EMPLOYEE

Fill out as many sheets as needed to show all work experience hours that you want to have recognized. You can also submit a letter from an employer certifying to the same elements as this sheet.

1. APPLICANT IDENTIFICATION	
CCQ client no. or social insurance no.	Trade or specialty for which you wish to have hours recognized
Last name	First name

2. COMPANY IDENTIFICATION			
Company name		Employer's CCQ no. (if available)	
Main telephone number		Name and title of the person responsible	
No.	Street	Suite or unit no.	
P.O. Box	City	Province	Postal code

3. SUMMARY OF HOURS WORKED PER YEAR				
Year	Year	Year	Year	Year
Total number of hours for this year	Total number of hours for this year	Total number of hours for this year	Total number of hours for this year	Total number of hours for this year

4. WORK EXPERIENCE DESCRIPTIONS	
Types of site <sup>1</sup>	
<input type="checkbox"/> Residential	Details the type of building and the nature of work: _____
<input type="checkbox"/> Institutional and commercial	Details: _____
<input type="checkbox"/> Industrial	Details: _____
<input type="checkbox"/> Civil engineering and roadwork	Details: _____
<input type="checkbox"/> Other	Details: _____
Detailed description of the task <sup>2</sup>	Percentage of hours devoted to this task
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Where appropriate, specify the type of heavy equipment used to perform these tasks (make and model).	

## 5. SIGNATURE AND ATTESTATION OF THE COMPANY PERSON RESPONSIBLE

I attest to the truth of all the information provided in the present document. I understand that recognition of hours obtained as a result of the present application for an apprentice competency certificate is irreversible and may have an impact on the applicant's apprenticeship classification and wage rate.

\_\_\_\_\_  
Signature of the company person responsible

\_\_\_\_\_  
Date (YYYY-MM-DD)

## 6. APPLICANT'S SIGNATURE

I attest to the truth of all the information provided in the present document.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date (YYYY-MM-DD)

<sup>1</sup> The hours recognized must have been performed on a construction site not covered by Act R-20 (either in or outside of Québec). You must indicate all types of construction sites related to the hours worked on the sheet. A short description is recommended (for example: housing renovation, building sidewalks for a municipality, repairs made to the employer's buildings, industrial construction outside of the province of Quebec).

<sup>2</sup> The detailed tasks for each trade or specialty are defined in Schedule A of the *Regulation respecting the vocational training of the workforce in the construction industry* (Chapter R-20, r.8).

**Supporting documents:** For each year for which you want to have work experience hours recognized, you must provide proofs of remuneration that correspond to the number of hours that you are submitting. The types of proof most frequently submitted are pay statements and tax slips (T4 or Relevé1).

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Signature of the company person responsible

\_\_\_\_\_  
Date (YYYY-MM-DD)

## 6. APPLICANT'S SIGNATURE

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Applicant's signature

\_\_\_\_\_  
Date (YYYY-MM-DD)

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