

For the purpose of obtaining an **Overhead Door Technician (ODT) - Level One** Journeyman Certificate through the Trades Qualifier - Work Experience program, the *Employer Assessment of Competency* is:

- Recognized by the Alberta Board of Skilled Trades (ABST),
- Used by an employer to verify competencies (working in residential and light industrial facilities) required for the ODT Level One certificate, and
- Completed by both the candidate's immediate supervisor AND a senior company official with signing authority.

A previous or Canadian non-Alberta employer should complete the form only if satisfied the candidate has successfully demonstrated all the required competencies and the candidate must have been employed within five years of the candidate's application.

Requirements for ODT Level One certification:

- 18 months and 1500 hours of on-the-job work experience,
- Completion of the *Employer Assessment of Competency*, and
- Successful completion of a multiple-choice written examination administered by Apprenticeship and Industry Training (AIT).

For a complete description of the scope of the trade, competency profile, and the complete application procedure, please visit the AIT website at www.tradesecrets.alberta.ca. The ODT Level One Competency Profile posted on the Tradesecrets website should be reviewed prior to completing this assessment.

Instructions for ODT Level One *Employer Assessment of Competency*:

Part 1 - completed by candidate's **immediate supervisor**:

- Confirm whether the applicant has demonstrated the required competencies during the period of assessment with the organization.
- The candidate can be considered competent when he/she is able to perform the required tasks without supervision.

Part 2 - completed by a **senior company official with signing authority**:

- Declares he/she has made inquiries of the candidate's immediate supervisor to confirm the candidate is functioning at the skill level and carrying out the tasks expected of a certified person in the trade.

The candidate must scan or take a photo of the completed *Employer Assessment of Competency* and upload it to their [MyTradesecrets \(MTS\)](#) account by clicking the Upload button in the Documents tab.

The information provided is subject to verification by AIT.

Candidate's Name: _____ Date of Birth: _____

| PART 1: TO BE COMPLETED BY THE CANDIDATE'S IMMEDIATE SUPERVISOR By checking "Yes" or "No" in the <i>Reply</i> column, indicates whether the applicant demonstrated the following competencies during the period of assessment with your organization. | Reply Below |
|---|---|
| Time in the Trade ODT-Level One Hours and Months: _____ Hours _____ Months Start Date (YYYY/MM/DD) _____ End Date (YYYY/MM/DD) _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Documentation and Record Keeping Reads, interprets and creates reports and records related to the installation, repair, inspection and maintenance of overhead doors. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Communication Communicates effectively; evaluates and selects the appropriate form of communication for dealing with crew, supervisors, suppliers, customers and other personnel associated with the work site. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Door Sections and Hardware Installs replaces, inspects and repairs door sections and hardware for standard lift doors. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Counter Balancing Systems Installs, replaces, inspects and repairs torsion, extension and counter balancing systems. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Door Operators for Overhead Doors Installs, replaces, inspects and repairs chain hoists, trolley and jackshaft operators; diagnoses electric operator and safety device faults and repairs or replaces components. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Hand and Power Tools Competent in the use of all hand & power tools associated with the occupation. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Workplace Health and Safety Applies all workplace health and safety practices and is First Aid-certified. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Other: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Name of candidate's supervisor (printed): _____ Signature: _____ | |

All information provided may be verified by Alberta Apprenticeship and Industry Training.

PART 2: EMPLOYER DECLARATION (MUST BE COMPLETED BY A SENIOR COMPANY OFFICIAL WITH SIGNING AUTHORITY)

I hereby declare I have made inquiries with the candidate's supervisor and am satisfied the candidate has demonstrated competence in performing tasks at the skill level of a certified person in the trade.

| | |
|-------------------------|-------------------------|
| Signature: _____ | Date: YYYY/MM/DD |
|-------------------------|-------------------------|

Employer contact information:

Print name: _____ Title/position: _____
 Company/organization: _____
 Address: _____ Postal code: _____
 Email: _____ Phone number: _____