

TRADE EQUIVALENCY ASSESSMENT (TEA) APPLICATION REQUIREMENTS CHECKLIST

Section A – Applicant Identification

All applicants are required to complete this section of the application, including the following mandatory fields:

PERSONAL INFORMATION

This information helps the College identify who you are. Please complete all parts, including the following:

- First, middle and last name: please print exactly as it is shown on your official government identification
- Date of Birth
- College membership identification number, if you already hold membership in another trade or class
- Primary contact information
- Name and code of the trade in which you are applying for equivalency
(list of trade names and codes can be found on the College's website under "Trades in Ontario")
- Details on any apprenticeship or registered training agreement you have held in Ontario
- Attach a copy of government issued photo ID

TRADE CREDENTIAL INFORMATION

Out-of-Province Certificate (e.g. Red Seal and Provincial C of Qs)

This section is only for applicants who hold an authorizing certificate from another Canadian province or territory, and who wish to work in Ontario. Once you have completed this section, skip to Section D – Fees, Payment and Correspondence Information

- Attach photocopy of Certificate of Qualification or licence

Department of National Defence - Certificate of Military Achievement

This section is only for applicants who have received their Certificate of Military Achievement at the QL5 Level. Once you have completed this section, skip to Section B – Work Experience and Education.

- Attach photocopy of Member Personnel Record Resume (MPPR)

Non-Canadian Credential

If you have trade experience from outside Canada, please indicate your trade and any certification information you may have

- Attach photocopy of your certificate or credential

Section B – Declarations, Consent and Membership Questions

This section outlines declarations of accuracy for your application, as well as consents for application and notice of collection of personal information. Please read these statements carefully.

- Answer all four membership questions, sign and date prior to submitting application

Section C – Work Experience and Education

All applicants except those with an authorizing certificate from another Province or Territory are required to complete this section.

- Provide information relating to previous employment and training (include as much information in the form as possible)
If you require more space, please attach additional pages. Applications without supporting documents will be returned as incomplete.

- Attach sufficient evidence of trade skills and work experience (employment letters, resume of work, etc.)
Ensure you provide evidence that meets the hours and skill requirements of your trade as per the apprenticeship training standard

Only for applicants in the trade of Welder (456A):

- Valid all-position Shielded Metal Arc Welding (SMAW) certificate (photocopies)

Only for applicants in the trade of Hoisting Engineer (339A/B/C):

- Statement of Experience form (available on the College's website)

Section D – Fees, Payment and Correspondence Information

All applicants are required to complete this section.

- Include payment with your application

- I confirm that I have read and understand the *Trade Equivalency Assessment (TEA) Application Guide*, and have completed my application and provided the required supporting documentation in accordance with the Guide

Signature

X

Date (mm/dd/yyyy)

Completed *Trade Equivalency Assessment and Membership Application* forms may be submitted with supporting documentation to the College in person, by mail, courier, fax (1-866- 398-0368) or by email: TEA-APP@collegeoftrades.ca



Trade Equivalency Assessment and Membership Application

The information provided in or in connection with this application is collected, used and disclosed under the authority of the *Ontario College of Trades and Apprenticeship Act, 2009* (OCTAA), the Regulations under the OCTAA, the College's by-laws, and other applicable laws or regulations.

For instructions on completing the application please refer to the *Trade Equivalency Assessment (TEA) Application Guide*, available online

Section A - Applicant Identification

Personal Information									
First Name			Middle Name or Initial			Last Name			
Preferred First Name (optional)				Date of Birth (mm/dd/yyyy) / /			OCOT Membership ID (if exists)		
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Preferred Language <input type="checkbox"/> English <input type="checkbox"/> French		Home Telephone Number			Business Telephone Number		
Cell Telephone Number				Email Address					
Street Number		Rural Route	Street Name				Unit Number		PO Box
City/Town			Province		Postal Code		Country		
Name of trade under which you are applying for College membership					Trade code under which you are applying for College membership				
Do you currently have, or have you ever had, a contract of apprenticeship or training agreement registered in Ontario?									<input type="checkbox"/> No <input type="checkbox"/> Yes
Contract or Training Agreement Number				Certificate of Apprenticeship Number					
If you currently have a registered training agreement, do you authorize the College to cancel it upon approval of your equivalency application? <input type="checkbox"/> No <input type="checkbox"/> Yes									
Trade Credential Information									
1. Out-of-Province Certificate (e.g. Red Seal and Provincial C of Qs)									
Do you hold an authorizing certificate in the above trade issued in another Canadian province or territory?									<input type="checkbox"/> No <input type="checkbox"/> Yes
If yes in what trade?									
Certificate Number			Date of Issue (mm/dd/yyyy) / /			If applicable, what is the Red Seal Number?			
Province or territory of issue <input type="checkbox"/> QC <input type="checkbox"/> NB <input type="checkbox"/> NS <input type="checkbox"/> PE <input type="checkbox"/> NL <input type="checkbox"/> MB <input type="checkbox"/> SK <input type="checkbox"/> AB <input type="checkbox"/> BC <input type="checkbox"/> NT <input type="checkbox"/> YT <input type="checkbox"/> NU									
Do you hold an authorizing certificate (Certificate of Qualification) issued by Ontario in another trade? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, in what trade?									
Certificate of Qualification Number			Date of Issue (mm/dd/yyyy) / /			If applicable, what is the Red Seal Number?			
2. Department of National Defence - Certificate of Military Achievement (QL5)									
Do you hold a Certificate of Military Achievement at the QL5 level in this or another trade? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, in what trade?									
Certificate Number			Date of Issue (mm/dd/yyyy) / /			If yes, what rank did you attain?			
3. Non Canadian Credential									
Do you hold a certificate or credential issued by another country or non-Canadian jurisdiction in this or another trade? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, in what trade?									
Certificate Number			Date of Issue (mm/dd/yyyy) / /			If yes, please indicate country, state, province or other local jurisdiction			
Please indicate the name of the certification body									

SECTION B - Declaration, Consent and Membership Questions

Declaration of Accuracy and Acknowledgement

Certification of Accuracy of Information Provided

By signing below, I declare that all information I have provided or will provide to the Ontario College of Trades (the College) in the future in, or in connection with, this application is true, accurate and complete. I agree to immediately notify the College regarding any future changes to information I have provided. I acknowledge that if I provide false or misleading information or documents to the College, or fail to provide information or documents requested by the College:

- I may be denied a Certificate of Qualification, Provisional Certification of Qualification, or a Statement of Membership;
- any Certificate of Qualification, Provisional Certificate of Qualification, or a Statement of Membership issued by the College to me may be suspended, revoked, or made subject to specified terms, conditions or limitations;
- I may be guilty of an offense and on conviction liable for a fine; or
- I may be subject to other proceedings, penalties, costs, or consequences under the *Ontario College of Trades and Apprenticeship Act, 2009* (the OCTAA), the Regulations under the OCTAA, and the College's by-laws, including but not limited to, professional misconduct proceedings which could result, if I am found guilty, in a range of penalties, including an order directing the Registrar to revoke, suspend or impose terms, conditions or limitations on any Certificate of Qualification, Provisional Certificate of Qualification, or Statement of Membership which the College may issue to me."

Consents

I consent that the College may request and receive information, documents or records about me from, and provide information, documents or records about me to, persons who may have information relevant to this application including:

- my current and former employers;
- governmental bodies, organizations (including departments, ministries, boards and agencies) or officials, police forces or military authorities;
- governing, regulatory, self-regulatory, apprenticeship or other trades bodies, authorities, agencies or officials;
- educational or training institutions;
- consumer reporting agencies;
- publicly available sources under applicable laws or regulations;
- any other relevant sources.

I consent that the College may collect, use and disclose any information, documents or records provided in or in connection with this application for the following purposes:

- verifying the information;
- assessing and processing this application;
- administering my file or membership with the College;
- administering and enforcing the OCTAA, the Regulations under the OCTAA, and the College's by-laws;
- conducting inspections or investigations;
- conducting policy analysis, evaluation and research related to apprenticeship and trades certification;
- any other purpose for which the College requests your consent and to which you consent;
- as required or permitted by law

I consent that all information, documents or records requested by the College for the above-noted purposes from other sources may be provided to the College. In addition, I consent that the College may collect, use and disclose my personal information and confidential information provided in, or in connection with, this application as provided above, as well as in accordance with the College's privacy policy available at <http://www.collegeoftrades.ca/privacy> and as permitted or required by applicable laws or regulations. The information provided in, or in connection with, this application is collected, used and disclosed under the authority of OCTAA, the Regulations under the OCTAA, the College's by-laws, and other applicable laws or regulations.

Membership Background Questions

In the following questions, "you" refers both to an individual and to any corporation, partnership, proprietorship, or other organization used by an individual (alone or with others).

If you answer "Yes" to any of the following questions, please provide full details, including particulars, dates, results, outcomes, and supporting documents (if you need more space, please attach an extra page).

Have you ever had investigations proceedings or actions commenced against you by an apprenticeship or trades organization, regulatory or self-regulatory body in Canada or elsewhere, in relation to discipline, misconduct, incompetence, or incapacity?

No Yes If Yes, provide details.

Have you ever been refused membership, a licence, or a permit from an apprenticeship or trades organization, regulatory or self-regulatory body in Canada or elsewhere, on the grounds of discipline, misconduct, incompetence, or incapacity?

No Yes If Yes, provide details.

Have you ever had your membership, licence, permit or training agreement issued by an apprenticeship or trades organization, regulatory or self-regulatory body in Canada or elsewhere, revoked, suspended, or made subject to specified terms, conditions or limitations on the grounds of discipline, misconduct, incompetence, or incapacity?

No Yes If Yes, provide details.

Have you ever, as a member or holder of a licence, permit or training agreement of an apprenticeship or trades organization, regulatory or self-regulatory body in Canada or elsewhere, been reprimanded, admonished, fined, found guilty of an offence, received counselling, required to perform training or course of study, subject to any other remedial measures, or resigned, on the grounds of discipline, misconduct, incompetence, or incapacity?

No Yes If Yes, provide details.

Signature

X

Date (mm/dd/yyyy)

SECTION C – Work Experience and Education**Work Experience and Formal Instruction in the Trade (Do not complete this Section if you answered yes to Question 1 in Section A)****Employment 1 - Start with your most recent trade-related position**

What is/was your job title?		Work Start Date (mm/dd/yyyy) / /		Work End Date (mm/dd/yyyy) / /	
Provide a detailed description of your duties while working with this employer. Please describe skills, tools, equipment, types of projects, customers, etc. (if you need more space, please attach an extra page)					
Legal Name of Employer					
Operating Name of Employer (if different from legal name)					
Street Number	Street Name			Unit Number	PO Box
City/Town		Province	Postal Code	Country	
Daytime Telephone Number	Email Address		Website		Total Number of Hours Worked
Name of Contact Person (This person should be able to verify your description of job duties.)					
Last Name		First Name		Job Title	
Daytime Telephone Number	Work Email Address		What language does this contact person speak? <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other: Please specify _____		

Employment 2 (Please attach additional trade-related employment on separate sheets)

What was your job title?		Work Start Date (mm/dd/yyyy) / /		Work End Date (mm/dd/yyyy) / /	
Provide a detailed description of your duties while working with this employer. Please describe skills, tools, equipment, types of projects, customers, etc. (if you need more space, please attach an extra page)					
Legal Name of Employer					
Operating Name of Employer (if different from legal name)					
Street Number	Street Name			Unit Number	PO Box
City/Town		Province	Postal Code	Country	
Daytime Telephone Number	Email Address		Website		Total Number of Hours Worked
Name of Contact Person (This person should be able to verify your description of job duties)					
Last Name		First Name		Job Title	
Daytime Telephone Number	Work Email Address		What language does this contact person speak? <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other: Please specify _____		

