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| Certification of Surveying Experience | | | | | | | | | | | | | | | |
| *N.B. : All information supplied will be treated confidentially by the ACLS.* | | | | | | | | | | | | | | | |
| Identification of the trainee | | | | | | | | | | | | | | | |
|  | | | | | | |  | | |  | | | | | |
| *Surname and given name* | | | | | | | | | | | | | | | |
| Employment of the trainee covered by this certification | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| *Company name* | | | | |  |  | | | | | | | |  |  |
| *Address* | | | | |  | *Municipality* | | | | | | | |  | *Province* |
| *Postal code* | | | | |  | *E-mail* | | | | | | | | | |
| ( ) | | | | |  | ( ) | | | | | | | | | |
| *Telephone* | | | | |  | *Fax* | | | | | | | | | |
| *Trainee’s title* | | | | |  |  | | | | | | | | | |
| *Name of immediate supervisor* | | | | |  | *Supervisor’s Professional Affiliation* | | | | | | | | | |
| *Employment starting date :* | | | | */ /* | | | | | | | | |  | | |
| *Year Month* *Day* | | | | | | | | | | | | | | | |
| *Employment termination date (if applicable) :* | | */ /* | | | | | |  | | |  | | | | |
|  | | | *Year* *Month* *Day* | | | | | |  | | | *Reason for leaving* | | | |
| *If part-time employment, specify :* |  | |  | | | | | |  | | |  | | | |
|  | | |  | | | | | |  | | |  | | | |

|  |  |  |
| --- | --- | --- |
| Identification of the supervisor | | |
|  |  |  |
| *Surname and given name* |  | Professional Affiliation |
| *Company name* |  | *Title* |
| ( ) |  |  |
| *Telephone* |  | *E-mail* |

[ REPLACE THIS PAGE BY YOUR OWN WORK EXPERIENCE ]

|  |
| --- |
| **DESCRIPTION OF WORK EXPERIENCE** |

Your particular situation will require you to describe surveying activities and accomplishments that are different from the ones suggested here. A well-structured description should be presented on a maximum of two pages.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DESCRIPTION OF WORK EXPERIENCE** | | | | | | | | | | |
| PART A | | | | | | | | | | |
| **Context and work situation, responsibilities within the company** | | | | | | | | | | |
|
| PART B | |  | | | |  | | | | |
| **Time \*** | | Surveying activities | | | | Accomplishments | | | | |
|
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| % | |  | | | |  | | | | |
|
| % | |  | | | |  | | | | |
| % | |  | | | |  | | | | |
| % | |  | | | |  | | | | |
| \* % of time devoted to this activity in relation to the entire period covered by this certification.  We certify that the information contained in this document is, to the best of our knowledge, true. | | | | | | | | | | |
|
|  |  | |  |  |  | |  |  |  |  |
|  | *Signature of the trainee* | |  | *date* |  | | *Signature of the supervisor* |  | *date* |  |