



AGMT Work History Form

Use this form to demonstrate the required work history within the AGMT Scope of Certification. Please add as many employers as necessary to meet the 7500-hour certification requirement, beginning with your most recent. If you have between 7000 and 7499 hours, you will be able to sit for testing, but will need to resubmit an updated work history demonstrating > 7500 hours to be certified within 12 months of your passing PBT date.

Please read the below before completing this Application:

All applicants must:

- 1) Submit a **pay stub, W2, or pension statement** from each employer. Your name, employer's information and date needed on which ever document is submitted.

OR

- 2) Have someone who can attest to your work history sign the signature page as well (**see "Third Part Verification" Box on Page 3, below**). No additional documentation required.

Once complete, submit via the CIP.

Applicant Name (first and last):

1. Employer (Name and Address)	Dates of Employment (mm/yyyy)	Hours worked
Type of work performed (check all that apply):		
<p>Used basic mathematical and communication skills to effectively perform day-to-day glazing work</p> <p>Used tools of the trade and followed safe work practices</p>	<p>Interpreted drawings performed layout tasks</p> <p>Applied sealants, gaskets, and barriers to weatherize work</p> <p>Followed quality control practices</p>	

2. Employer (Name and Address)	Dates of Employment (mm/yyyy)	Hours worked
Type of work performed (check all that apply):		
<p>Used basic mathematical and communication skills to effectively perform day-to-day glazing work</p> <p>Used tools of the trade and followed safe work practices</p>	<p>Interpreted drawings performed layout tasks</p> <p>Applied sealants, gaskets, and barriers to weatherize work</p> <p>Followed quality control practices</p>	

3. Employer (Name and Address)	Dates of Employment (mm/yyyy)	Hours worked
Type of work performed (check all that apply):		
<p>Used basic mathematical and communication skills to effectively perform day-to-day glazing work</p> <p>Used tools of the trade and followed safe work practices</p>	<p>Interpreted drawings performed layout tasks</p> <p>Applied sealants, gaskets, and barriers to weatherize work</p> <p>Followed quality control practices</p>	

4. Employer (Name and Address)	Dates of Employment (mm/yyyy)	Hours worked
Type of work performed (check all that apply):		
<p>Used basic mathematical and communication skills to effectively perform day-to-day glazing work</p> <p>Used tools of the trade and followed safe work practices</p>	<p>Interpreted drawings performed layout tasks</p> <p>Applied sealants, gaskets, and barriers to weatherize work</p> <p>Followed quality control practices</p>	

5. Employer (Name and Address)	Dates of Employment (mm/yyyy)	Hours worked
Type of work performed (check all that apply):		
<p>Used basic mathematical and communication skills to effectively perform day-to-day glazing work</p> <p>Used tools of the trade and followed safe work practices</p>	<p>Interpreted drawings performed layout tasks</p> <p>Applied sealants, gaskets, and barriers to weatherize work</p> <p>Followed quality control practices</p>	

***If you need to add additional employers, please copy page 2 and attach to this form before submitting.**

By signing, I am attesting that the information provided is true and completed to the best of my ability.

Signature: Date (mm/dd/yy):
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Third Party Verification (to be completed by someone other than the Applicant who can attest to the Applicants work history). This can be a coworker, former supervisor, Director of Training, etc.

Print Name: Job Title: Phone number: Signature: Date (mm/dd/yy):
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