



Statement of Experience

For you to progress to Approved Electrician Status, you must have 2 years' experience as a graded Installation Electrician.

You are required to document 4 jobs, recently undertaken, on the attached Job Records, where you were responsible for the installation, any operatives on the job and any requisitioning of materials for the job. In addition, you will have been responsible for Health & Safety, and the Safe Working Practices in accordance with the Electricity at Work Regulations 1989, and ensuring the installation complied with BS 7671 and any other relevant Regulations, Standards and Codes of Practice.

Ideally you should complete these Job Records once you have sufficient experience, and your employer has given you sufficient responsibility for these jobs. We may contact your employer to verify the details on these Job Records. Please complete your personal details below and, once you have completed the final job you should enter your current employer details.

Candidate's Details

Name:	NI Number:
Address:	
Post Code:	Email Address:
Tel. No:	Mobile Number:

Employer's Details

Current Employer:	
Contact Name:	Email Address:
Address:	
Post Code:	
Tel. No:	

You are required to document your experience as an electrician on the attached Job Records, providing as much detail as possible.

It should record your ability to carry out electrical installation work with adequate technical and supervisory knowledge, to be able to work on your own proficiently and carry out installation work without supervision in the most efficient and economical manner. In addition, it should record that you are able to set out jobs from drawings and specifications and requisition the necessary installation materials.

Ideally the jobs detailed overleaf should be installations, or parts of larger installations, that you were responsible for. This responsibility should cover the areas detailed above in relation to technical and supervisory knowledge, setting out work from drawings, etc., and undertaking the work in an efficient and cost-effective manner.

Note: All Job Records must be completed and signed off by your employer and returned to SECTT at the above address or email address.

SECTT will review your Statement of Experience and the Job Records, and if everything is in order SECTT will retain a copy, send you the original, and forward a copy to your employer for their records. An Employer Declaration form and an ACA application form will also be sent to your employer. Your employer will complete and return the Employer Declaration form and the ACA application form and if everything is in order SECTT will arrange a suitable date with your employer for you to attend the ACA. Once this booking has been confirmed, SECTT will provide you with further details of the ACA.

For SECTT Office Use Only

Form Checked	Date	Authorised	Date
Grading Date			

Job Record 1

Brief Description

Date of Job Duration Days

Location Street
Town
Postcode

Did you set out the job from drawings and/or specifications? Yes No

Did you requisition materials for the job? Yes No

Did you supervise other operatives on the job? Yes No

If yes: Number of Electricians

Number of Apprentices

Number of Adult Trainees

Number of Labourers

Were there any other technical aspect of the work that you assisted with or carried out? Yes No

If yes, give a brief description:

Did you undertake any Safe Isolation Procedures? Yes No

Did you undertake any Inspection and Testing? Yes No

Did you undertake any Commissioning? Yes No

Did you undertake any Live Working (including testing)? Yes No

If yes, was it in compliance with the Electricity at Work Regulations 1989? Yes No

Did the installation comply with current edition of BS 7671? Yes No

Did you apply all relevant Health and Safety Legislation? Yes No

Did the installation comply with:

Electricity Safety, Quality, & Continuity Regulations 2002 Yes N/A

Relevant British and European Standards Yes N/A

Relevant Codes of Practice Yes N/A

Did you read and understand the Risk Assessment applicable to the job? Yes No

Did you complete the work in the most efficient and economical manner Yes No

Additional Comments:

To be completed by employer at the time of undertaking the job*

Employer

Supervisor/Manager

Name

Contact Tel. No.

Date

Signature

*By signing this form, you confirm that the electrician undertook the above job with a level of competence and capability you would expect from them, and that they have the potential to be re-graded to Approved status (in accordance with the SJIB grading definition), upon successful completion of the ACA. Employer's signature should be added last as the form locks, to unlock right click and clear signature.

Job Record 2

Brief Description

Date of Job Duration Days

Location Street
Town
Postcode

Did you set out the job from drawings and/or specifications? Yes No

Did you requisition materials for the job? Yes No

Did you supervise other operatives on the job? Yes No

If yes: Number of Electricians

Number of Apprentices

Number of Adult Trainees

Number of Labourers

Were there any other technical aspect of the work that you assisted with or carried out? Yes No

If yes, give a brief description:

Did you undertake any Safe Isolation Procedures? Yes No

Did you undertake any Inspection and Testing? Yes No

Did you undertake any Commissioning? Yes No

Did you undertake any Live Working (including testing)? Yes No

If yes, was it in compliance with the Electricity at Work Regulations 1989? Yes No

Did the installation comply with current edition of BS 7671? Yes No

Did you apply all relevant Health and Safety Legislation? Yes No

Did the installation comply with:

Electricity Safety, Quality, & Continuity Regulations 2002 Yes N/A

Relevant British and European Standards Yes N/A

Relevant Codes of Practice Yes N/A

Did you read and understand the Risk Assessment applicable to the job? Yes No

Did you complete the work in the most efficient and economical manner Yes No

Additional Comments:

To be completed by employer at the time of undertaking the job*

Employer

Supervisor/Manager

Name

Contact Tel. No.

Date

Signature

***By signing this form, you confirm that the electrician undertook the above job with a level of competence and capability you would expect from them, and that they have the potential to be re-graded to Approved status (in accordance with the SJIB grading definition), upon successful completion of the ACA. Employer's signature should be added last as the form locks, to unlock right click and clear signature.**

Job Record 3

Brief Description

Date of Job Duration Days

Location Street
Town
Postcode

Did you set out the job from drawings and/or specifications? Yes No

Did you requisition materials for the job? Yes No

Did you supervise other operatives on the job? Yes No

If yes: Number of Electricians
Number of Apprentices
Number of Adult Trainees
Number of Labourers

Were there any other technical aspect of the work that you assisted with or carried out? Yes No

If yes, give a brief description:

Did you undertake any Safe Isolation Procedures? Yes No

Did you undertake any Inspection and Testing? Yes No

Did you undertake any Commissioning? Yes No

Did you undertake any Live Working (including testing)? Yes No

If yes, was it in compliance with the Electricity at Work Regulations 1989? Yes No

Did the installation comply with current edition of BS 7671? Yes No

Did you apply all relevant Health and Safety Legislation? Yes No

Did the installation comply with:

Electricity Safety, Quality, & Continuity Regulations 2002 Yes N/A

Relevant British and European Standards Yes N/A

Relevant Codes of Practice Yes N/A

Did you read and understand the Risk Assessment applicable to the job? Yes No

Did you complete the work in the most efficient and economical manner Yes No

Additional Comments:

To be completed by employer at the time of undertaking the job*

Employer

Supervisor/Manager

Name

Contact Tel. No.

Date

Signature

***By signing this form, you confirm that the electrician undertook the above job with a level of competence and capability you would expect from them, and that they have the potential to be re-graded to Approved status (in accordance with the SJIB grading definition), upon successful completion of the ACA. Employer's signature should be added last as the form locks, to unlock right click and clear signature.**

Job Record 4

Brief Description

Date of Job	Duration	Days	
Location	Street		
	Town		
	Postcode		
Did you set out the job from drawings and/or specifications?		Yes	No
Did you requisition materials for the job?		Yes	No
Did you supervise other operatives on the job?		Yes	No
If yes: Number of Electricians			
Number of Apprentices			
Number of Adult Trainees			
Number of Labourers			
Were there any other technical aspect of the work that you assisted with or carried out?		Yes	No
If yes, give a brief description:			
Did you undertake any Safe Isolation Procedures?		Yes	No
Did you undertake any Inspection and Testing?		Yes	No
Did you undertake any Commissioning?		Yes	No
Did you undertake any Live Working (including testing)?		Yes	No
If yes, was it in compliance with the Electricity at Work Regulations 1989?		Yes	No
Did the installation comply with current edition of BS 7671?		Yes	No
Did you apply all relevant Health and Safety Legislation?		Yes	No
Did the installation comply with:			
Electricity Safety, Quality, & Continuity Regulations 2002		Yes	N/A
Relevant British and European Standards		Yes	N/A
Relevant Codes of Practice		Yes	N/A
Did you read and understand the Risk Assessment applicable to the job?		Yes	No
Did you complete the work in the most efficient and economical manner		Yes	No
Additional Comments:			

To be completed by employer at the time of undertaking the job*

Employer

Supervisor/Manager

Name

Contact Tel. No.

Date

Signature

*By signing this form, you confirm that the electrician undertook the above job with a level of competence and capability you would expect from them, and that they have the potential to be re-graded to Approved status (in accordance with the SJIB grading definition), upon successful completion of the ACA. Employer's signature should be added last as the form locks, to unlock right click and clear signature.