American Institute of Constructor

CONSTRUCTOR CERTIFICATION COMMISSION DOCUMENT NO. 86

Construction Experience Verification Form

INSTRUCTIONS: This form must be completed as part of your Certified Professional Constructor and Certified Associate Constructor examination application if applying in whole or part by experiential qualifications. Fill out one form for each type of experience that you are using as part of your Qualifying Experience. This may mean use of multiple forms. Each form must be signed by a supervisor certifying the work experience claimed. This form should be submitted to the AIC along with your exam application. Applications are not reviewed or approved without this form.

Candidate Name:_____ **Job Title**: _____

Employer Name: _____

Experience Information – Indicate only one type of experience per form:

◯ Executive ◯ Technical ◯ Administrative ◯ Teach/Research ◯ Trade Supervision

Start Date (MM/YYYY):_____ End Date: _____

Describe your job responsibilities and projects during your time. (You may use a separate sheet to expand your submission)

Candidate Signature:_____ Date: _____

Supervisor/Certifier Information:

Name:_____ Title: _____

Company:_____ Email: _____

Phone:_____ City & State of Office: _____

I hereby certify that I have read the preceding work and job descriptions provided by the candidate and that the information is an accurate description of their role and duties.

I certify that I have direct knowledge of the candidate's duties, and supervised, oversaw and/or evaluated their work during the time period claimed.

I certify that the information provided here by the candidate is true and accurate to the best of my knowledge.

Certifier Signature:_____ Date: _____

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