

Level 2 Plumbing/H&V - Up-skilling Application for On Site Assessment

Please complete the details specified below and return this form to the JIB-PMES either by post (JIB-PMES, Lovell House, Sandpiper Court, Phoenix Business Park, Eaton Socon, St Neots, Cambridgeshire, PE19 8EP) or email (info@jib-pmes.org.uk).

Part One – Personal and Employment details

Applicant Name:		
Home Address:		
Post Code:		
Home Telephone Number:		
Mobile Number:		
National Insurance Number:		
Current Job Title:		
Nationality:		
Date of Birth:		
Email Address		
Current employment status:	Employed <input type="checkbox"/> Self employed <input type="checkbox"/> Unemployed <input type="checkbox"/>	
Employment History		
Current Employer Name (if applicable):		
Employer Address:		
Post Code:		
Telephone Number:		
Contact Name:		
Length of Service:		
Previous Employers		
Name	Job Title	Length of Service

Part Two – Existing JIB-PMES/UKPHMES Registration status

Please complete this section if you are currently registered with the JIB-PMES and/or you hold a valid JIB-PMES/UKPHMES CSCS Registration card. If this does not apply to you, please go straight to Part Three.

Type of card held (e.g. Green Operative/Labourer):	
Card expiry date:	
Card APN number: (This is located on the back of the card in the bottom left hand corner)	

Please tick this box if you would want to exchange your existing card for a Red Apprentice/Trainee* card for use during the completion of your training/assessment programme.

**Please note that this decision will NOT affect the automatic upgrading of your card to a full Plumber Blue/Mechanical Pipefitter Blue registration card upon successful completion of your assessment programme.*

Part Three – Existing qualifications details

Details of technical industry related qualifications
(Including short courses)

Qualification title*	Level (if applicable)	Date Achieved

**Please note that the minimum technical qualification that is required for acceptance onto this scheme is either the full:*

- *City and Guilds 6129 Level 2 Certificate in Basic Plumbing Studies – achieved and certificated before 31 January 2012*
- *City and Guilds 6128 Level 2 Certificate in Heating and Ventilating – achieved and certificated before 31 January 2012*

Please include copies/scans of these qualifications as confirmation of your achievements.

Part Four (A) – Work experience evidence check (Plumbing)

Applicant Name

To assist with the evidence gathering process please complete the following chart to confirm the activities that you have actually performed as a plumber. Can you please therefore indicate your experience level against each criteria using the following code:

- R (regularly)** = Have regularly and competently worked with or within during the previous 24 months
LF (less frequently) = Have competently worked with or within, but with limited experience
N (not at all) = No experience

You will also need to confirm the different range of plumbing systems on which you have completed these work activities:

Unit Title	Outcomes	R	LF	N
Apply safe working practices in a building services engineering working environment	• Demonstrate personal health and safety precautions in the workplace			
	• Prepare and use access equipment in the workplace			
	• Check that the work area is safe in order to carry out work			
	• Liaise with those responsible for health and safety in the workplace			
Install and maintain domestic plumbing and heating systems	• Prepare sites for the installation of plumbing and heating systems and components in the workplace			
	• Install plumbing and heating systems and components in the workplace			
	• Soundness test plumbing and heating systems and components in the workplace			
	• Decommission plumbing and heating systems in the workplace			
	• Maintain plumbing and heating components in the workplace			
Systems range (indicate how often you have performed the above tasks on the following systems):				
Cold water				
Hot water				
Central heating				
Sanitation				
Rainwater				

I confirm that the above details are a true reflection of my experience and qualifications.

Signed Applicant:

Date:

For Office Use Only

Qualifications checked Unique Scheme Registration Number.....

Part Four (B) – Work experience evidence check (H&V)

Applicant Name

To assist with the evidence gathering process please complete the following chart to confirm the activities that you have actually performed as a H&V Fitter. Can you please therefore indicate your experience level against each criteria using the following code:

- R (regularly)** = Have regularly and competently worked with or within during the previous 24 months
LF (less frequently) = Have competently worked with or within, but with limited experience
N (not at all) = No experience

You will also need to confirm the different range of H&V systems on which you have completed these work activities

Unit Title	Outcomes	R	LF	N
Maintain the safe working environment for HVACR	• Use safe procedures ○ Operate in a safe manner			
	○ Check that the work area is safe in order to carry out work			
	• Use safe working practices ○ Working to procedures			
	○ Using the correct tools ○ Handling potentially hazardous materials			
Maintain Effective Working Relationships	• Establish , maintain and develop effective working relationships with others ○ Obtaining information before commencing work			
	○ Deals with a range of methods of communication			
	• Establish , maintain and develop effective working relationships with others ○ Obtaining information before commencing work			
Contribute to the improvement of business products and services for HVACR activities	• Promote the image of the business to others			
	• Identify and recommend opportunities for improving customer care			
	• Demonstrate environmental awareness within the workplace			
Install Heating & Ventilating Systems and Components	• Prepare work locations for the installation of systems and components			
	• Carry out the installation of systems and components			
Pre Commission and De Commission Heating and Ventilating Systems	• Carry out pre-commissioning checks and tests on systems			
	• De-commission systems			

Systems range (indicate how often you have performed the above tasks on the following systems):

Cold water			
Hot water			
Hot water heating			
Fire protection			
Chilled water			
Warm air heating			
Industrial heating			

I confirm that the above details are a true reflection of my experience and qualifications.

Signed Applicant:

Date:

For Office Use Only

Qualifications checked Unique Scheme Registration Number.....