

APPRENTICE MONTHLY PROGRESS REPORT

CENTRAL OREGON SHEET METAL JATC 7013

ENTER THE TOTAL (COLUMN "C") FROM PREVIOUS MPR IN COLUMN "B". ENTER DAILY, TO THE HALF HOUR, TIME SPENT IN EACH WORK PROCESS. ADD THE HOURS FROM "B", PLUS DAILY HOURS AND ENTER IN "C". "C" ARE NOW YOUR "B" HOURS FOR NEXT MONTH

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

MONTH/YEAR _____

A	B	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	C	
Fabrication & Assembly 2150 hrs																																		
Install & Erection 3150 hrs																																		
Layout 900 hrs																																		
Miscellaneous 1000 hrs																																		
<u>TOTAL</u> <u>OJT</u> <u>HOURS</u>																																		
School Hours																																		

PLEASE FILL IN LOWER PORTION COMPLETELY AND REMEMBER ALL 3 SIGNATURES

CLASS TAKEN: _____

INSTRUCTORS COMMENTS: _____

INSTRUCTORS SIGNATURE: _____

EMPLOYER: _____

EMPLOYER ADDRESS _____

EMPLOYER PHONE: _____

APPRENTICE: I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT

APPRENTICE SIGNATURE: _____

DATE: _____

EMPLOYER: Please answer the following questions:

- | | | |
|---|-----|----|
| 1. Is the apprentice punctual? | YES | NO |
| 2. IS he/she willing to learn? | YES | NO |
| 3. Does he/she show initiative? | YES | NO |
| 4. Is his/her quality of work good? | YES | NO |
| 5. Does he/she follow safety practices? | YES | NO |
| 6. Would you recommend him/her for a re-rate? | YES | NO |

EMPLOYER COMMENTS: _____

EMPLOYER/SUPERVISOR SIGNATURE: _____

DATE: _____

MPR'S ARE DUE THE 1ST OF THE MONTH AND LATE AFTER THE 10TH

MAIL OR FAX or WMAIL ALL MPR'S PRIOR TO THE 10TH FAX: 503-371-7668

EMAIL: NWApprenticeship@gmail.com

MAIL: NW Apprenticeship Services

4727 San Francisco Dr. NE, Salem, OR 97305

Phone: 541-279-1543 Fax: 503-371-7668