



# Apprenticeship Training Record **LE "B" License Technician**

## Southern Willamette Valley Limited Energy Electrical JATC

Mail, Fax, or Email To: Lou Long, Committee Administrator  
 4727 San Francisco Dr. NE Salem, OR 97305  
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Enter the total hours from the previous Monthly Progress Record in "Previous Hours". Enter daily, to the nearest hour, time spent on each work process; add the hours from "Previous Hours" plus Daily Record and enter in "Total" column. Keep a copy for your next month's entry. MPR's are due by the 10<sup>th</sup> of the following month.

Name / Agreement #: \_\_\_\_\_ Wage per hour: \_\_\_\_\_ Month / Year: \_\_\_\_\_

On-the-Job Training Categories	Req. Hours	Previous Hours	Enter Number of Hours Worked Each Day on Each Category																															
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Installations	1,750																																	
Troubleshooting & Maintenance	250																																	
Occupation Specific: Communications Systems, Specilized Control Systems	2,000																																	
<b>TOTAL OJT HOURS</b>	<b>4,000</b>																																	
<b>TOTAL SCHOOL HOURS</b>	<b>288</b>																																	

Name of firm/employer: \_\_\_\_\_  
 Employer address: \_\_\_\_\_  
 \_\_\_\_\_  
 Employer Phone #: \_\_\_\_\_  
 \_\_\_\_\_  
 Apprentice address: \_\_\_\_\_  
 APPRENTICE EMAIL: \_\_\_\_\_  
 Apprentice Phone #: \_\_\_\_\_  
 \_\_\_\_\_  
 Apprentice signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employer: Please answer the following questions:

- 1) Is the apprentice punctual?
- 2) Is he/she willing to learn?
- 3) Does he/she show initiative?
- 4) Is his/her quality of work good?
- 5) Does he/she follow established safety procedures?
- 6) Would you recommend him/her for rerating?

Y	N

Employer comments: \_\_\_\_\_  
 \_\_\_\_\_  
 Employer signature: \_\_\_\_\_ Date: \_\_\_\_\_