INDUSTRIAL APPRENTICE MONTHLY WORK REPORT

This form, properly filled out and signed, must be reached, not later then the 10th of each month, to the Finishing Trades Institute of the Ohio Region. Failure to submit this report may result in the dismissal from the Program or may delay your advancement and scheduled pay increase. This will be determined by the FTIOR Board of Trustees.

Instructions: Fill this form out completely, including shift worked, and hours spent on each category during the work day. Any item not covered in categories A-K should be written in the miscellaneous column.

Month Reporting for _____ *Year* _____

Total Monthly Hours _____ *Local Union #:* _____

Current Contractor: _____

Training Center (Please Circle One):

Strongsville   Columbus   Cincinnati   Toledo

_____   _____
Apprentice's Full Name   Period of Apprenticeship

_____
Address

_____   _____   _____
City   State   Zip

(_____) _____
Area Code   Telephone No.

[ ] ✔ If NEW Address   [ ] ✔ If NEW Phone No

Apprentice must keep this report neat and clean at all times. Hours worked on each Process should be entered by the apprentice daily. At the end of the month or on the last day of work for each Employer, space below should be filled in and signed by Foreman.

_____
Employer / Contractor

_____   _____   _____
Foreman Name   Progress   Date

*Rate Progress by one of the following code symbols:

Very Good-**VG,**   Good-**G,**   Fair-**F,**   Poor-**P**

Rev. 11/2014

DAY OF MONTH	RTI (Classroom Time)	A (Abrasive Blasting)	B (Spray Painting)	C (Stripping)	D (Vacuuming)	E (Rigging / De-Rigging)	F (Containment setup/teardown)	G (Blast Equipment Operation)	H (Paint Equipment Operation)	I (Power Washing)	J (Concrete Paint/Sealer)	K (Traffic Control)	L (Quality Control)	M (Mobilization)	N (Fiber-glassing)	O (Laid Off)	MISC (Miscellaneous)
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TOTAL DAY	RTI	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	MISC