## 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

(________)  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

---

**TOTAL**

**Rev. 11/2014**