

PLUMBERS & PIPEFITTERS UA LOCAL 192 J.A.T.C. APPRENTICE TIME REPORT

NAME _____ MO/YR 1 2018 JOB LOCATION _____

PHONE NUMBER _____ ADDRESS _____

EMPLOYERS _____ *Journeyman/Supervisor Signature on Opposite Side. Please Fill out.* **TOTALS**

DATE	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	TOTALS	
USE & CARE OF TOOLS																																	
SAFETY, RIGGING & SIGNALING																																	
AIR CONDITIONING																																	
GAS PIPING																																	
HEATING SYSTEMS																																	
HYDRONIC SYSTEMS																																	
INDUSTRIAL PIPING																																	
PLUMBING FIXTURES																																	
DRAINAGE SYSTEMS																																	
WATER SUPPLY																																	
GAS INSTALLATIONS																																	
PIPING INSTALLATIONS																																	
CONTROLS																																	
REFRIGERATION SYSTEMS																																	
PIPING																																	
BOILERS, RADIATORS																																	
TOTALS																																	

APPRENTICE SIGNATURE _____

This daily report must be filled out and turned in by the 10th of the following month.

**** This form now has two sides. Opposite side is to be filled out by Journeyworker or Supervisor.**

MAIL TO: 411 W 5th St. CHEYENNE WY 82007

FAX: (307)778-2718

COORDINATOR REVIEW DATE: _____

COORDINATOR INITIALS: _____

NON COMPLIANT: <input type="checkbox"/>	FRONT: <input type="checkbox"/>	BACK: <input type="checkbox"/>
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**PLUMBERS & PIPEFITTERS UA
LOCAL #192 JATC**

PROJECT:

LOCATION: (TOWN/CITY)

NAME OF EVALUATOR (PLEASE PRINT):

SIGNATURE:

TITLE:

DATE:

TIME:

All of the above is to be filled out by the Journeyworker or Supervisor. If there are any questions please contact:
Seth Kamarad
Training Coordinator Local #192
Work: 307-634-5837 Ext. 5
Cell: 307-421-0373

**MONTHLY RANKING TO BE FILLED OUT BY
JOURNEYMAN OR SUPERVISOR:**

PLEASE COMMENT:

>>>>COMPLIANCE:<<<<

****TO BE COMPLIANT, THIS SHEET MUST BE FILLED OUT FRONT AND BACK BY THE APPRENTICE AND HIS JOURNEYWORKER AND SIGNED BY BOTH. THE RANKING PORTION OF THIS PAGE MUST BE COMPLETED AND IF THERE ARE DEFICIENCIES PLEASE PROVIDE DETAILS ABOVE. IF THESE ITEMS ARE NOT COMPLETED THIS TIME REPORTING SHEET WILL BE CONSIDERED NON-COMPLIANT. THIS ISSUE IS COVERED IN THE APPRENTICE AGREEMENT.**

APPRENTICE RANKING

RANK 1 TO 5 / 5 BEING HIGHEST

1	2	3	4	5	DESCRIPTION:
					APPEARANCE
					ATTENDANCE
					ATTITUDE
					COOPERATION
					INITIATIVE
					MECHANICAL ABILITY
					PERFORMANCE
					PUNCTUALITY
					SAFETY
					KNOWLEDGE OF TOOLS
					KNOWLEDGE OF EQUIPMENT

**Please provide information about serious issues due to lack of training that need to be addressed by the JATC in the Comment Section provided to the left.*

