APPRENTICE MONTHLY PROGRESS RECORD

Oregon-Columbia Laborers JATC

Enter the total hours to date "D" from the prior month in Column "B"
Each day record hours spent on each work process
Add the Daily Record hours and total in Column "C"
Add "B" plus "C" enter into Column "D"
Total Daily Hours and Column "C" & "D" on bottom of chart
Have supervisor sign & complete employer portion on bottom
Sign, date and make a COPY for your records
Fax, mail or deliver to NWCC

DUE BY THE 10TH OF EACH MONTH
Keep a copy of each MPR for your records

Email, Fax, or deliver to:
Fax: **503-252-9560**
Email: **mprs@nwcoc.com**

NW COLLEGE OF CONSTRUCTION
8111 NE Holman St
Portland, OR 97218
Questions? Call: **503-256-7300**

MONTH _____ YEAR _____

Name:_____

Phone #: _____

Address: _____

_____

Please call or write the apprenticeship office to report change of address or phone number.

Keep track of time daily. Record to the closest ½ hour.

"A" Work processes as per standards	"B" Hours from prior month	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	"C" Total hours this month	"D" Total hours to date
General Skills (600)																																		
Tools, Equip. & Mat. (600)																																		
Safety (400)																																		
Environmental Remediation (800)																																		
Building Const. (800)																																		
Heavy/Hwy Const. (800)																																		
Total Hours																																		

Name of company: _____

Location or work site: _____

Supervisor's name: _____

Supervisor's phone #: _____

Supervisor's signature: _____
Please verify the information above and complete required employer rating section before signing⇒

Apprentice's signature: _____
I certify that the above information is correct

Supervisor please complete required **EMPLOYER RATING SECTION**

1 = Good
2 = Average
3 = Below Average
4= Unsatisfactory

Interest toward work .....____
Compatibility .....____
Attitude (general) .....____
Adaptability .....____
Quantity of work .....____
Quality of work .....____
Safety Practices .....____

Immediate supervisor comments:

_____

_____

_____

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