

## APPRENTICE QUARTERLY WORK AND TRAINING RECORD

\_\_\_\_\_  
Apprentice

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

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This card must be in your possession during all work and school hours. New record cards will be issued when this completed card is submitted at the end of the quarter.

I certify that all of the entries I have made on this record are true and correct.

\_\_\_\_\_  
Signature of Apprentice

\_\_\_\_\_  
Date

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**Work Process Areas**

- A. Architectural and Ornamental
- B. Pre-engineered Metal Buildings
- C. Post-Tensioning
- D. Reinforcing
- E. Rigging and Cranes
- F. Structural
- G. Welding
- H. Other: \_\_\_\_\_
- I. Other: \_\_\_\_\_
- J. Other: \_\_\_\_\_

Month: \_\_\_\_\_ Year: \_\_\_\_\_

Sun	Mon	Tue	Wed	Thu	Fri	Sat

A:\_\_\_ B:\_\_\_ C:\_\_\_ D:\_\_\_ E:\_\_\_ F:\_\_\_ G:\_\_\_ H:\_\_\_ I:\_\_\_ J:\_\_\_  
Total hours for each work area

\_\_\_\_\_  
Total Work Hours

\_\_\_\_\_  
Foreman's Signature

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Month: \_\_\_\_\_ Year: \_\_\_\_\_

Sun	Mon	Tue	Wed	Thu	Fri	Sat

A:\_\_\_ B:\_\_\_ C:\_\_\_ D:\_\_\_ E:\_\_\_ F:\_\_\_ G:\_\_\_ H:\_\_\_ I:\_\_\_ J:\_\_\_  
Total hours for each work area

\_\_\_\_\_  
Total Work Hours

\_\_\_\_\_  
Foreman's Signature

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Month: \_\_\_\_\_ Year: \_\_\_\_\_

Sun	Mon	Tue	Wed	Thu	Fri	Sat

A:\_\_\_ B:\_\_\_ C:\_\_\_ D:\_\_\_ E:\_\_\_ F:\_\_\_ G:\_\_\_ H:\_\_\_ I:\_\_\_ J:\_\_\_  
Total hours for each work area

\_\_\_\_\_  
Total Work Hours

\_\_\_\_\_  
Foreman's Signature