

Plumbing Apprentice Daily Work Record

Apprentice Name: _____

Plumbing Year: 1 2 3 4

Please Circle one



Company: _____

Month/Year _____

| Work Processes | OJT Hours | Calendar Dates | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Month Total | | | |
|---------------------------------------|-------------|----------------|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-------------|----|--|--|
| | | 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 | | |
| Install Drain, Waste & Vent Piping | 1800 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Install Hot & Cold Water Piping | 1800 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Install Gas Piping | 900 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Install Finish, Fixtures & Vents | 900 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Install Water Heaters & Vents | 350 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Testing of Waste, Water & Gas Systems | 350 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Strapping, Backing & Hangers | 350 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Design & Layout of Systems | 550 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operation & Care of Tools | 550 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Welding & Brazing | 450 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL PROGRAM OJT HOURS | 8000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RELATED INSTRUCTION TRAINING | 624 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Instructions:
 For each calendar date worked, list the number of hours in each work process category. If you work in different work processes in a day, list the corresponding number of hours worked for each process. Adding up the hours for each work process should total the number of hours worked in that day and that total should be listed in the row entitled "TOTAL PROGRAM OJT HOURS" for that calendar date. For each calendar date you attend class, list the number of hours in class in the row entitled "RELATED INSTRUCTION TRAINING". Add all figures across and down to get totals for the column entitled "Month Total" and for the rows entitled "TOTAL PROGRAM OJT HOURS" and "RELATED INSTRUCTION TRAINING".

List the month and year covered by this form and print your name at the top of this form. Failure to print your name could result in no credit being given if your signature is illegible. Sign the bottom right corner of this form and secure a signature from your trainer or employer.

Maintain a copy of this form for your records. Send the original to your employer or school by the tenth of each month. This form helps your sponsor track your on-the-job training hours. These records must be made available to the Department of Labor upon request.

 Trainer / Employer Signature

 Apprentice Signature