## **Texas Gulf Coast** Days of Residential Commercial Industrial **Total** the Hours Hours Hours Hours **Electrical JATC** worked Worked Worked Worked Month 1901 N. Port Corpus Christi, TX 78401 2 (361) 884-8414 3 (361(884-5282 fax 4 5 ccjatc@hotmail.com http://tgcjatc.tripod.com 6 7 Name: √ 8 9 Address: ✓ 10 11 City: ✓ 12 13 Zip: ✓ 14 15 Phone: ✓ 16 17 Employer: ✓ 18 19 Job: √ 20 21 Foreman: ✓ 22 23 Journeyman: ✓ 24 25 Pay Period: V 26 27 Year of Apprenticeship: ✓ 28 29 30 31 Hours worked this month Total accumulative hours from previous report Total accumulative hours from each classification Complete this form and add to your total work report sheet. YOU must have this completed form in the JATC office by the fifth (5) day of the following

Complete this form and add to your total work report sheet. YOU must have this completed form in the JATC office by the fifth (5) day of the following month. You must enter the number of actual hours worked in the column under classification of work performed. You must total the hours under each column on the line designated Hours worked this month. Then you enter the total accumulative hours worked each classification from the previous month's work report (not just last month's hours worked). On the line designated Hours worked from previous report on to this month's report. Then you add the totals from both lines and enter on the line designated Total hours worked each classification on this month's report; then you total; all hours on this line under column designated Total hours worked in all classifications. This last total is the accumulated total hours worked in all classifications and is the current hours worked toward the 8,000 hours on-the-job training necessary for completion of apprenticeship. All spaces and blanks MUST BE FILLED OUT TO BE VALID. Your journeyman must sign every work report. Work reports can be mailed, faxed, or left in the mail slot of the apprenticeship office.

MONTH:	YEAR:

Did you work all th	ne regular hours available	to you this month?
YES	NO	If No, explain:
Signature of Appre	ntice:	Date
	JOURNEY	MAN PORTION
This report is to be apprentice.	completed by the Journe	yman or Foreman supervising the work done by the
your supervision?	It is recommended the ap	side of this report did the apprentice work under prentice be under your supervision for at least on b progress of learning the trade.
Time	-	
Job progress:	Satisfactory	Unsatisfactory
JIW Name:		Signature:
		Phone:
		Zip:
Remarks:		

