**LOCAL 63 APPRENTICE MONTHLY PROGRESS REPORT ` (708)345-6067**

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| --- | --- | --- |
| **Employer:** Please answer these questions. | **Yes** | **No** |
| Punctual? |  |  |
| Is the apprentice willing to learn? |  |  |
| Shows initiative? |  |  |
| Does quality work? |  |  |
| Follows all safety rules? |  |  |
| Shows up daily? |  |  |
| Positive attitude? |  |  |
| Has proper tools? |  |  |
| Prepared to work? |  |  |
| **Foreman Signature:** |  |  |
| **Phone #** |  |  |
| **\*Additional comments can be emailed to the Apprentice**  **Coordinator at:** [**apprenticetraining@iwlocal63.com**](mailto:apprenticetraining@iwlocal63.com) |  |  |
|  |  |  |

**Name:**

**Book #: Today’s Date:**

**Month: Year:**

**Contractor: Dates:**

**Apprentice Signature:**

**Comments:**

**For each day, list the number of hours worked in each area. Keep your records to the closest hour. Completed and signed progress reports are due in the Apprenticeship Office by the 15th day of each month.**

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| **Day of the 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 | | **Total** | |
| **Work Performed** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Curtain Wall / Window Wall |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
| Doors |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
| Rolling Shutters |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
| Stairs |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
| Rigging and Cranes |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
| Welding |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
| Misc. Steel |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |
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| **Total Work Hours** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Classroom Hours |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |