ABC MONTHLY WORK REPORT

Carpentry

Month _____

Year _____

Work Processes	Hours Required by ATELS	Hours From Last Report	Days 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 Hours Month	Total Hours To Date
1. Basic Trade	300																																		
2. Foundations, Walls and Floors	1500																																		
3. Framing	800																																		
4. Roofs	800																																		
5. Exterior Mill Work	800																																		
6. Interior Wall Coverings	500																																		
7. Floors	500																																		
8. Stairs	500																																		
9. Interior Finish	1000																																		
10. Miscellaneous	1300																																		
Total	8000																																Total hours		

APPRENTICE:

Name: _____

***(Changes Only)**

*Email: _____

*Phone number: _____

EMPLOYER:

Is the apprentice punctual?	☐	Yes	☐	No
Is he/she willing to learn?	☐	Yes	☐	No
Does he/she show initiative?	☐	Yes	☐	No
Is his/her quality of work good?	☐	Yes	☐	No
Does he/she follow established safety practices?	☐	Yes	☐	No

Comments:

The apprentice will complete the form, have it signed by the employer and submit it to ABC by the 10th of each month. Email to info@abcalaska.org or mail to:
Apprenticeship Office, 360 W. Benson, Suite 200, Anchorage, AK 99503, Fax (907) 565-5645.

By signing this form both the apprentice and supervisor verify that the apprentice performed the work in each category under proper supervision.

Sponsoring Company _____

Signature of journeyworker or employer _____ Signature of Apprentice