

Local 192 Cheyenne WY JATC Pipefitter Work Evaluation Form

WESTERN ST.

Name	Phone	
Address	(Check if new address) City	ZIP
Contractor	Month	20

Quality of Work Scores

5-Excellent

4-Above Average

3-Average

2-Below Average 1-Very Poor

	Work Process System	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	Hours	of Work
Α	Piping and Tubing																																	
В	Blueprint Reading																																	
С	Mathematics, Measurements, Scien	се																																
D	Safety																																	
Е	Rigging																																	
F	Steam Systems																																	
G	Instrumentation & Pneumatic Contro	ols																																
Н	Welding																																	
- 1	Hydronic Systems																																	
J	HVACR																																	
K	Pumps																																	
L	Leadership & Supervision																																	
	TOTAL																																	
APPRENTICE EVALUATION: Please rate each category below accordingly. 5-Excellent; 4-Above Average; 3-Average; 2-Below Average; 1-Very Poor																																		
MONTHLY RANKING TO BE FILLED OUT APPRENTICES: Keep Accurate Records Daily														Арр																				
Project BY JOURNEYMAN OR SUPERVISOR							1.	Enter daily record of hours of on-the-job learning.																Attendance										
	(PLEASE COMMENT)						2.	Submit to Journeyman or Supervisor for evaluation at the end of the month.														he	Attitude											
Location (Town/City)		3.														Cooperation																		
							4	following month for the month worked.													Initiative													
Name of Evaluator (please print)						- _					Due l	by 10	Oth o	f fol	llowi	ng n	nont	h						Mechanical Ability										
Signa	ure									_ c	omm	ents:	:														ľ	Perf	forma	ance				

All of the above is to be filled out by the Journeyworker or supervisor.

Title

Date

Time

Please provide information about serious issues due to lack of training that need to be addressed by the JATC in the Comment Section Above.

COMPLIANCE

To be compliant, this sheet must be filled out completely by the Apprentice and his Journeyworker and signed by both. The ranking portion of this page must be completed and if there are deficiencies, please provide details above. If these items are not completed, this time reporting sheet will be considered noncompliant. This issue is covered in the Apprentice Agreement.

RETURN TO:

Punctuality

Knowledge of Tools

Knowledge of Equipment

Safety

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