CONFIDENTIAL RATING REPORT
FOR EVALUATION OF APPRENTICE WORK TRAINING PROGRAM

Name of Unindentured Worker: ____________________________________________ Date: ___________

Employer: ____________________________________________________________ Class: Unindentured

Dear Foreman;

The Joint Apprenticeship Training Committee must have accurate information on each apprentice as to his/her character, job aptitude, attitude, and ability.

Please have the “on-the-job” supervisor complete front and back this form in its entirety. Your help in this matter will be greatly appreciated.

1. ATTENDANCE
   _______ (a) Off a great deal (no valid reasoning)
   _______ (b) Off occasionally (reasons excusable)
   _______ (c) Seldom off
   _______ (d) Is he/she normally on time. Yes____ No____

2. ATTITUDE TOWARD CO-WORKERS AND EMPLOYER
   _______ (a) Disrespectful and does not cooperate
   _______ (b) Occasionally indifferent, not anxious to improve
   _______ (c) Usually pleasant, cheerful, cooperative
   _______ (d) Has unusual interest in job, respectful, helpful

3. JOB KNOWLEDGE (consider length of time in program)
   _______ (a) Knows very little
   _______ (b) Could know more- requires assistance
   _______ (c) Has average knowledge of job
   _______ (d) Has above average knowledge of job

4. USE OF WORKING TIME
   _______ (a) Wasteful
   _______ (b) Loafs
   _______ (c) Average
   _______ (d) Busy

5. HANDLING OF TOOLS, EQUIPMENT AND MATERIAL
   _______ (a) Rough and careless
   _______ (b) Indifferent
   _______ (c) Careful and orderly

6. OBSERVANCE OF SAFETY RULES
   _______ (a) Careless and disrespectful of rules
   _______ (b) Sometimes takes chances, disregards safety of others
   _______ (c) Works safely and carefully
7. PERSONAL APPEARANCE
   _______  (a) Poor
   _______  (b) Fair
   _______  (c) Neat and clean

8. In your opinion, does the apprentice have the potential ability and general characteristics to become a good Journeyman? Yes______  No______

9. If you had to lay off, would the apprentice be: (check one)
   One of the first to go _____  Average _____  One of the last to go _____

APPRENTICE TRAINING REPORT

<table>
<thead>
<tr>
<th>Type of work done during month</th>
<th>Hours</th>
<th>Job Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Bx or Romex wiring</td>
<td></td>
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<tr>
<td>2. Rigid conduit concealed</td>
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<tr>
<td>3. Rigid conduit exposed</td>
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<td>4. EMT concealed</td>
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<td>5. EMT exposed</td>
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<td>6. Wire pulling</td>
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<td>7. Duct systems &amp; auxiliary gutters</td>
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<td>8. Hydraulic pipe bending</td>
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<td>9. Maintenance &amp; trouble shooting</td>
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<td>10. Fixture wiring &amp; installation</td>
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<td>11. Fire, sound or security systems</td>
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<td>12. Service, substation or distribution center</td>
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<td>13. Layout from blueprint</td>
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<td>14. Motor control circuits</td>
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<td>15. Miscellaneous activities</td>
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</tbody>
</table>

Comments:

Print Evaluator’s Name: _______________________________________________________

Signature of Evaluator: _______________________________________________________

Evaluator’s Card Number: ____________________________________________________

Date of Signature: _________________________________________________________