

Joint Apprenticeship and Training Committee Local Union 164, IBEW



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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

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

Comments:

Print Evaluator's Name: _____

Signature of Evaluator: _____

Evaluator's Card Number: _____

Date of Signature: _____