

Monthly Work Process Form  
Plumbing



PRINT NAME HERE

Name: \_\_\_\_\_  
Level \_\_\_\_\_

Month-Year: \_\_\_\_\_

Work Processes	Total Hours	Pay Week	Pay Week	Pay Week	Pay Week	Pay Week	Monthly Total
		End Date	End Date	End Date	End Date	End Date	
		1	2	3	4	5	
Care and Use of Tools, Materials & Safety	500						
Caulking and Cast Iron Pipe	400						
Drainage Piping & Fitting	800						
Venting	450						
Power & Industrial Process Piping	750						
Water Heater Installation	750						
High and Low Pressure Boilers	750						
Hot & Cold Water Systems/Domestic	800						
Gas Systems Appliances	500						
Single Fixture Installation	500						
Pipe Cutting, Reaming, Threading & Flanging	400						
Preparation of Tools, Equipment & Material for Plumbing & Heating	400						
Installation & Maintenance of Steam, Hot Water Heat. & Chilled Water Cooling Sys.	1000						
General Sheet Fabrication/Installation & Installation of Skylights/Ventilators	1000						
Total Hours Per Week							

Keep Copy for Your Records. Maintain All Co. Pay Check Stubs In Case Verification is necessary. THE APPRENTICE IS REQUIRED TO SUBMIT THESE SHEETS BY THE 10TH DAY AFTER THE MONTH THE HOURS WERE EARNED AS REQUIRED BY THE DEPT. OF LABOR APPRENTICESHIP STANDARDS.

Previous Month's Grand Total \_\_\_\_\_  
Grand Total Apprenticeship Hours \_\_\_\_\_

Supervisor's Initials: S \_\_\_\_\_ S \_\_\_\_\_ S \_\_\_\_\_ S \_\_\_\_\_ S \_\_\_\_\_  
S = Satisfactory U \_\_\_\_\_ U \_\_\_\_\_ U \_\_\_\_\_ U \_\_\_\_\_ U \_\_\_\_\_  
U = Unsatisfactory

Comments: \_\_\_\_\_  
(continue on back if necessary)

This certifies that the above named apprentice received on-the-job training and work experience in accordance with, but not limited to, the schedule listed above. PLEASE NOTE: OJT experience need not be in the order listed, nor must the hours be continuous. Wage % reported by work process sheet total on file. Due by the 10th day after the month hours are worked.

I have reviewed this report **ALL TOTALS ARE COMPLETED** and I hereby verify the above statement of work is correct.

Supervisor's Printed Name: \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Apprentice's Signature \_\_\_\_\_ Date: \_\_\_\_\_