

Weekly OJT HOUR CREDIT

PLUMBING/ PIPEFITTER

PLEASE BE ADVISED:

1. Apprentices must turn in their hours sheet weekly to the Apprentice Coordinator. Once received, the Apprentice Coordinator will confirm work hours against the apprentice's timecard provided by the Construction Administration Assistant.

2. OJT hours must reflect actual time worked. VACATION, HOLIDAY, AND SICK DAY HOURS CANNOT BE SUBMITTED.

- 3. Prevailing Wage Hours and Non-Prevailing Wage Hours both contribute to the total hours worked.
- 4. OJT Hours may not be carried over from the previous month.
- **5.** Employers must keep a copy of this form for their records.
- 6. Once OJT hours have been , they CANNOT be changed.

WEEKLY OJT HOUR REPORTING PROCESS

1. In each column, record the DAILY quantity of hours worked for each Work Process during each appropriate day.

2. Total the hours for each day, then total for each work process. Use these totals as reference to ensure they are correct. (For example, if the total hours worked for the week equal to more than 60 hours, there may be a mistake with the written quantities that must be corrected before submission.)

3. IMPORTANT: Before submitting hours, you MUST verify the hours are correct, as they CANNOT be changed after they are submitted.

APPRENTICE NAME	BEGINNING WEEK DATE	YEAR

WORK PROCESSES BY TRADE	total Req Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	TOTAL
A. INSTALL PIPING FOR WASTE, SOIL, SEWAGE	1900								
B. INSTALLHOT&COLD-WATERSUPPLY PIPING	1700								
C.DOMESTIC HEATING & GAS FITTINGS	800								
D. WELDING & BRASING	400								
E. INSTALLATION, MAINTENANCE & REPAIR OF GAS EQUIPMENT & FITTINGS	400								
F.CARE & USE OF SPECIALIZED TOOL & EQUIPMENT	200								
G.SKETCHING, BLUEPRINT READING, CODE	200								
H.INSTALLATION/MAINTENANCE OF STEAM&HOTWATERSYSTEMS	1000								
I.POWER&INDUSTRIAL PROCESS PIPING	1000								
H.SAFETY	400								
DAILY TOTALS	8000								

FOREMPLOYERUSEONLY

Please use this section if you wish print this page to have internal verification that the hours stated above are accurate.

Signature of Apprentice

Date Date

Signature of Employer Representative – Apprentice Manager

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