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**Weekly OJT Hour Credit**

HVACR Service

**PLEASE BE ADVISED:**

1. Trainees must turn in their hours sheet weekly to the Trainee Coordinator. Once received, the Trainee Coordinator will confirm work hours against the trainee’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 the 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. Safety** | | 200 |  |  |  |  |  |  |  |  |
| **B. Care and Use of Specialized Tools** | | 300 |  |  |  |  |  |  |  |  |
| **C. Electrical Schematics** | | 300 |  |  |  |  |  |  |  |  |
| **D. Brazing, Soldering, Piping** | | 400 |  |  |  |  |  |  |  |  |
| **E. Hydronic Systems** | | 300 |  |  |  |  |  |  |  |  |
| **F. Maintenance** | | 800 |  |  |  |  |  |  |  |  |
| **G. Heating Troubleshooting** | | 700 |  |  |  |  |  |  |  |  |
| **H. Cooling Troubleshooting** | | 700 |  |  |  |  |  |  |  |  |
| **I. Client Relations** | | 300 |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |
|  | **DAILY TOTALS** | 4000 |  |  |  |  |  |  |  |  |

**FOR EMPLOYER USE ONLY**

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

Signature of Employer Representative – Apprentice Manager Date