MA# 1062 **Committee: Advertising Display Signmaker/Erector JATC** **Areaonejatc.com** **email- apprenticeship@areaonejatc.com**

Enter the total hours from the previous Monthly Progress Report in Column 'B'. Enter daily, to the nearest hour, time spent on each work process; add the hours from Column 'B' plus daily record hours and enter total in Column 'C'. Keep a copy of each MPR for your next month's entry.

Mail to:
Area I Signmaker/Erector
15800 SW Boones Ferry Road, Suite B-3
Lake Oswego, OR 97035
Phone: 503-675-0548
Fax 503-675-0543

Name: _____ Agreement # _____

Address: _____

Month/Year

'A' List work processes as in standards	'B' Hours brought forward	Each day list the number of hours worked on each work process. Keep your records to the nearest hour.																															'C' Total hours month	"D" Total hours to date
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Material Stockroom Equipment - 200																																		
Patterns & Blueprints-300																																		
Layout Design - 1000																																		
Assembly of Display - 2000																																		
Painting of Display & Parts – 500																																		
Installation/Service/ Maintenance of Display – 2500																																		
Transport/Hoisting Equip Maintenance & Repair - 1500																																		
8000 TOTAL HOURS																																		
Enter class hours attended-576																																		

Class Taken: _____

Instructor's Comments: _____

Instructor's Signature _____

Name of Firm/Employer: _____

Location or Worksite: _____

Phone Number: _____

Apprentice: I certify that the above information is correct.

Signed: _____

Employer: Please answer the following questions:	Yes	No
1. Is the apprentice punctual?		
2. Is he/she willing to learn?		
3. Does he/she show initiative?		
4. Is his/her quality of work good?		
5. Does he/she follow established safety practices?		
6. Would you recommend him/her for rerating?		

Employer Comments: _____

Employer Signature: _____