

KCEF / ABC – KENTUCKIANA, INC
Apprenticeship OJT Monthly Worksheet
 (Instructions for completing this form are on the previous page)

Name: _____ Company: _____

Trade: _____ Level: _____ Month: _____ Year: 2009

Apprentice's Signature: _____ Supervisor's Signature: _____

A copy of this form is due to the ABC office and your employer no later than the 5th day of the month after the month's work that it documents (i.e., September's form is due by October 5). Please fax the ABC's copy to (502) 451-1700. Keep the original for your records. Apprentices and supervisors who sign this form are verifying the accuracy of the information contained within it.

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Last Month's Grand Total													
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Total OJT Hours Completed _____
 (This is the total of all of the hours in the "This Month's Grand Total" boxes)