Apprentice _____

Employer _____

PHCC Apprenticeship Program
8226 Stoney Brook Drive
Chagrin Falls, OH 44023
800-686-7422

Apprenticeship Monthly Labor, Wage and Progress Report

Please FAX or E-mail this report to PHCC for recording by the 6th of the following month.
fax: 216-393-0095
email: rocco@phccohio.org

	HVAC 2018-2019	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Aug
1	General Trade Orientation												
2	Fabrication of system components												
3	System installation and connection												
4	Equipment installation												
5	System maintenance												
6	Equipment repair												
7	Machine shop practice												
8	Miscellaneous												
	Monthly Totals												
	Rate of Pay												
	Progress Rate (Circle One)	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P	E G F P
	Both EMPLOYER and APPRENTICE MUST SIGN REPORT EACH MONTH _____ Use Reverse Side for Comments.	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:	Appr: Empl:

ACCO PHCC e.Learning APPRENTICESHIP PROGRAM