**APPRENTICE PERFORMANCE EVALUATION**

Apprentice Name: \_\_\_\_ Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trade Classification and Year in Apprenticeship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please circle the appropriate choice as it best relates to the **latest 6 months** performance

**Average** is meant to be the expected level at this point in the apprenticeship

1. **DEPENDABILITY**: Is the ability to do required jobs with the minimum amount of supervision.

### Unacceptable Below Average Average Above Average Excellent

2. **JOB KNOWLEDGE:** Is the individuals job knowledge relative to the time spent in the program.

### Unacceptable Below Average Average Above Average Excellent

3. **QUALITY of WORK:** Is the correctness of work duties performed.

### Unacceptable Below Average Average Above Average Excellent

4. **QUANTITY of WORK:** Is the amount of works an individual does in a day.

### Unacceptable Below Average Average Above Average Excellent

5. **ATTITUDE:** Is the mental position taken about the job the individual is undertaking.

### Unacceptable Below Average Average Above Average Excellent

6. **RESPONSIBILITY:** Is individual responsible for tools and materials.

### Unacceptable Below Average Average Above Average Excellent

7. **ATTENDANCE:** Is the individual faithful in coming to work daily and adhering to work hours.

### Unacceptable Below Average Average Above Average Excellent

8. **TARDINESS:** Is that the individual often reports to work on time.

### Unacceptable Below Average Average Above Average Excellent

**COMMENTS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(Continue on back if necessary)

Journeyman Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­ Apprentice Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Journeyman Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please Return Form to J.A.T.C. Office**

**\*\*\*Or e-mail to** [**chip.davis@local125.com**](mailto:chip.davis@local125.com) **or fax to (319)362-5408\*\*\***