



8811 Career Drive  
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## Upper Valley Career Center Apprenticeship Weekly Work Report

Name:		Program:	Employer:
Date from		to	
	Hours	Type of work or reason for absence	
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Total			

Mentor Observations				
Category	Excellent	Good	Fair	Poor
Attendance	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Appearance for work	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Attitude	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Safety procedures	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Communications	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Follows instructions	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Overall performance	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>

Student Signature/Date:
Student Comments:
Mentor/Employer Signature/Date:
Mentor/Employer Comments:

This report must be submitted to the Apprenticeship Coordinator when you return to school.