**Area #3 Inside Electrical J.A.T.C.**

Each day list the number of hours on each work process. Keep your records to the closest hour.

List work processes as per standards

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 250 hrs. Stockroom &amp; Materials</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>2. 1250 hrs. Residential Wiring</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>3. 1250 hrs. Commercial Installations</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>4. 1000 hrs. Specialized Systems</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>5. 700 hrs. Controls &amp; Motor Installations</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>6. 250 hrs. Underground Constr.</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>7. 50 hrs. Trouble Shooting</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>8. 50 hrs. Finish &amp; Fixture Hanging</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>9. 1000 hrs. Remodeling &amp; Maintainence</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>10. 500 hrs. Commercial Trim-out</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>TOTAL HOURS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ENTER CLASS HOURS ATTENDED</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Instructors Signature:** ____________________________  **Comments:** ____________________________

**Apprentice Monthly Progress Record (MPR)**

**Mail To:**
Randall M. Tyle
Mid-Oregon I.E.C.
1907 Garden Ave (Suite 207)
Eugene, Or. 97403
Phone: 541-344-6473
Fax: 541-344-7590

**Name:** ____________________________  **Agreement #:** ____________________________

**Address:** ____________________________  **City:** ____________________________  **State:** ________  **Zip:** ________

**Month:** ________  **Year:** ________

**Instructors Signature:** ____________________________  **Comments:** ____________________________

**Apprentice:** Please complete the following section.

**Name of firm / employer:** ____________________________

**Location** of work: ____________________________

**Work phone number:** ____________________________  **Home:** ____________________________

**Employee wage per hour:** $ ____________________________

I certify that the information on this form is correct.

**Apprentice’s signature:** ____________________________  **Date:** ____________________________

**Apprentice:** Please complete the following section.

**Name of firm / employer:** ____________________________

**Location** of work: ____________________________

**Work phone number:** ____________________________  **Home:** ____________________________

**Employee wage per hour:** $ ____________________________

I certify that the information on this form is correct.

**Apprentice’s signature:** ____________________________  **Date:** ____________________________

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**Name of firm / employer:** ____________________________

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**Work phone number:** ____________________________  **Home:** ____________________________

**Employee wage per hour:** $ ____________________________

I certify that the information on this form is correct.

**Apprentice’s signature:** ____________________________  **Date:** ____________________________