



# OJT WEEKLY TRAINING REPORT

Trainee Name: \_\_\_\_\_

Trainee Classification: \_\_\_\_\_

Project Name and Number: \_\_\_\_\_

Contractor/Subcontractor: \_\_\_\_\_

Date Enrolled: \_\_\_\_\_ Report Period Week Ending: \_\_\_\_\_

Phase No.	Phase of Training (Per OJT Manual)	Required Hours	Hours This Week	Performance (Circle One)		Total Hours Accum. to Date
				S	NI	
I.				S	NI	
II.				S	NI	
III.				S	NI	
IV.				S	NI	
V.				S	NI	
VI.				S	NI	
VII.				S	NI	
VIII.				S	NI	
IX.				S	NI	
<b>TOTAL HOURS THIS WEEK:</b>						

**NOTE: PLEASE LIST ALL PHASES OF TRAINING ON EACH WEEKLY REPORT, EVEN IF TRAINING WITHIN A PHASE HAS BEEN COMPLETED**

### WEEKLY STATUS REPORT

(Indicate Action Taken)

/ / \_\_\_\_\_ QUIT \_\_\_\_\_ WITH NOTICE \_\_\_\_\_ WITHOUT NOTICE  
 DATE

/ / \_\_\_\_\_ DISMISSAL REASON: \_\_\_\_\_  
 DATE

// \_\_\_\_\_ SUSPENSION REASON: \_\_\_\_\_  
 DATE

// \_\_\_\_\_ LAID OFF REASON: \_\_\_\_\_  
 DATE

General Comments: \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_ Trainee Signature \_\_\_\_\_ Trainer Signature \_\_\_\_\_ Date / /

\_\_\_\_\_ Contract Administrator Signature of Approval \_\_\_\_\_ Date / /

Contractor Distr: 1 - Trainee; 2 - NHDOT Contract Administrator for Approval/Progress Payment (Contract Administrator: Give 2nd copy to Compliance Review Officer)