

| DATES              | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | TOTAL |
|--------------------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-------|
| A. Equipment hours |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |       |
| B. Equipment hours |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |       |
| C. Equipment hours |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |       |
| D. Equipment hours |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |       |
| E. Equipment hours |   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |       |

|           |  |            |  |
|-----------|--|------------|--|
| Last Name |  | First Name |  |
|           |  |            |  |
| Month     |  | Year       |  |
|           |  |            |  |

| Employer Rating |   |   |   |   |
|-----------------|---|---|---|---|
| A               | B | C | D | F |

|                    |  |
|--------------------|--|
| Total Hours Worked |  |
|--------------------|--|

|                      |                        |
|----------------------|------------------------|
| Company Name         | Employer<br>Print Name |
| Apprentice Signature | Employer Signature     |

• MARK YOUR HOURS IN THE CATEGORY OF WHAT YOU WORKED ON

#### LUBRICATION TECHNICIAN BRANCH

- Category A:** Preventative maintenance; greasing, fluid checks, problem notation  
**Category B:** Engines/power trains; fluid check and change  
**Category C:** Hydraulic systems; check and change  
**Category D:** Tires/brakes; service or adjustment  
**Category E:** Track type undercarriage; general maintenance

Total Hours – 8,000

#### INSTRUCTIONS FOR DAILY WORK RECORD CARD FOR APPRENTICES

- Days of the month
- Equipment hours (hours spent on equipment) correspond to categories(A, B, C . . . ) in the enclosed branch of training
- Total for each category in the far right column
- Total hours worked this month in the lower right box
- Employer signature and rating (card will be returned without these)
- Complete the personal information (full name and signature)
- The month and year for which you are reporting hours
- Name of the company for which you worked this month
- A time card is required every month – even if you do not work, mark a -0- , sign and send it in to the JAC

**On the last working day of each month, your daily work card must be signed, graded, and E-Mailed to [timecard03@gmail.com](mailto:timecard03@gmail.com) or mailed to the “N NV Operating Engineers JAC, P.O. Box 20962, Reno, NV 89515”.**

**This card must be received by the eighth (8<sup>th</sup>) of each month or you will start accruing penalties for each day the card is late.**