

1375 Dillingham Blvd. #200 • Honolulu, Hawaii 96817 (808) 845-4887 Email: education@abchawaii.org

## **DAILY PROGRESS RECORD**

Roofer

Apprentice's Name

Month \_\_\_\_\_

Year \_\_\_\_\_

Employe	oyer W													Wage Rate																			
Work Process																Date	Э																
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5																										rar	nd To	otal:	L				
<ol> <li>Built-up roofing, tar, asphalt and general work</li> <li>Shingle Work</li> <li>Other Materials</li> <li>Tools and Equipment</li> </ol> I certify that the number of											850 Hours 325 Hours 325 Hours						<ul> <li>Fill in all information</li> <li>Make a copy for yourself</li> <li>Turn this form in by the end of the next month</li> <li>TOTAL ALL ROWS</li> </ul> ning is correctly stated above.																
Signature of Apprentice  Work per												fori	ma	nce	a ra	tine	Signature of Employer Representative  g by supervisor																
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