

WORK SKILLS REPORT FORM

ENTER DAILY NUMBER OF HOURS WORKED AT EACH SKILL for the Month of _____, 2010

A. General Construction

- A - 1 Demolition / Excavation-Grading-Backfilling-Compaction
- A - 2 Elevation Control - Measurement- Grade Checking-Lay-Out
- A - 3 Underground Utility Lines / Trenching-Shoring / Pipelaying
- A - 4 Concrete Formwork
- A - 5 Concrete Placement/Finishing / Asphalt Paving
- A - 6 Unloading-Stockpiling-Distribution of Materials / Mixing of Materials / Clean-Up

| | 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 HOURS | | | |
|-----|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------------|--|--|--|
| A-1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A-2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A-3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A-4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A-5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A-6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

B. Tools & Equipment

- B - 1 Electric-Gasoline-Pneumatic Power Tools
- B - 2 Power Equipment
- B - 3 Scaffolding
- B - 4 Cutting Torch / Welding

| | 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 | | | | |
|-----|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--|--|--|--|
| B-1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B-2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B-3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B-4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

C. Safety

- C - 1 Work Zone Safety-Flagging-Traffic Control
- C - 2 Asbestos-Lead-Rad-Hazardous Waste Abatement
- C - 3 Selection-Use of Personnel Protective Equipment / Material Safety Data Sheets / Safety-Health Regulations

| | 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 | | | | |
|-----|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--|--|--|--|
| C-1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C-2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C-3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | 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 HOURS PER DAY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL HOURS FOR THE MONTH | | | | | |

APPRENTICE: _____

SSN: _____

ADDRESS: _____

WAGE RATE AT END OF MONTH: \$ _____ . _____

DATE FORM COMPLETED: _____

PHONE: _____

CONTRACTOR: _____

JOB LOCATION AT END OF MONTH: _____

Send More Work Report Forms Change Of Address No Work Performed

SIGNATURE: _____

For a Printable Version visit www.laborers-highhill.org

ENTER HOURS DAILY - FILL OUT COMPLETELY, DATE, SIGN and MAIL on 1st DAY of FOLLOWING MONTH or FAX to (636) 585-2604