



AMERICAN LINE BUILDERS JOINT APPRENTICESHIP AND TRAINING COMMITTEE

P.O. Box 370 Medway, Ohio 45341 Phone 937-849-4177 Fax 937-849-0592

Website: www.albat.org E-mail: office@albat.org

Lineman Apprentice Evaluation

Apprentice:		Subc.		L.U.	
Employer:		Step:			
How long has this apprentice worked with you?					
Evaluator's Name – PRINT CLEARLY:					

In order for the apprentice to gain the full benefit of this evaluation and be held accountable for progression by the subcommittee, you **MUST DISCUSS THIS EVALUATION WITH THE APPRENTICE AND HAVE THEM SIGN IT** to acknowledge that they have been made aware of its contents.

Please prepare this report carefully and accurately. Its value lies in your impartiality and sound judgment. Each part should be judged separately, and your evaluation of one trait should not unduly influence another. **This form should express an evaluation of the apprentice in comparison with other apprentices at the same period doing the same work.**

JOB KNOWLEDGE:

What do they know about their job? Do they need much help to do it well?	<input type="checkbox"/>	Should know more. Requires considerable assistance.	<input type="checkbox"/>	Could know more. Has to be helped often.	<input type="checkbox"/>	Knows job fairly well. Only needs instruction occasionally.	<input type="checkbox"/>	Knows job very well.
Remarks:								

ATTITUDE:

What is their attitude toward their job, fellow-workers and the Program?	<input type="checkbox"/>	Has little interest. Resents criticism. Complains and needs reprimanded.	<input type="checkbox"/>	Sometimes reluctant to cooperate. Satisfied with job; not anxious to improve.	<input type="checkbox"/>	Meets others halfway. Usually pleasant and cheerful. Wants to do a good job.	<input type="checkbox"/>	Very good team worker. Cooperative; never needs discipline. Very good interest.
Remarks:								

ATTENDANCE:

How much can you count on apprentice being on the job?	<input type="checkbox"/>	Loses considerable time, often with no excuse or a poor one.	<input type="checkbox"/>	Several days lost, but reasons excusable or permission granted	<input type="checkbox"/>	Very few or no days lost. Not over one excuse absence per month
Remarks:						

SAFETY MINDEDNESS:

How well does the apprentice know and obey safety rules?	<input type="checkbox"/>	Careless. Not safety conscious. Violates rules knowingly.	<input type="checkbox"/>	Sometimes takes chances. Forgets safety of others.	<input type="checkbox"/>	Usually safe worker. Knows safety rules and tries to be careful.	<input type="checkbox"/>	Very careful worker. Knows safety rules and makes suggestions for improvements.
Remarks:								

ATTENTION TO DUTY:

Does the apprentice make good use of their time?	<input type="checkbox"/> Wastes time. Does not work seriously.	<input type="checkbox"/> Only moderately industrious.	<input type="checkbox"/> Willing and eager worker. Always does full days' work.	<input type="checkbox"/> Exceptionally industrious and conscientious.
Remarks:				

What type of work is the apprentice currently engaged in? Please check all that apply.

<input type="checkbox"/> Distribution	<input type="checkbox"/> Street and Traffic Lights	<input type="checkbox"/> Transmission
<input type="checkbox"/> New Construction	<input type="checkbox"/> URD	<input type="checkbox"/> Substation

Does the apprentice show a real desire to learn trade?	
Does the apprentice display good climbing ability?	
Does the apprentice display the mechanical ability to become a good journeyman?	
In your opinion, is the apprentice progressing satisfactorily?	
Make any suggestions that you believe the apprentice can do to improve overall performance:	

Others Comments:	

DO NOT RETURN THIS EVALUATION UNTIL YOU HAVE DISCUSSED IT WITH THE APPRENTICE AND THEY HAVE SIGNED IT. If the apprentice is no longer on your crew, please return this form to the ALBAT office noting that in the comments section. If you questions or concerns please, please contact the ALBAT office at 800-223-9339.

Signature of Evaluator	Title	Date

Signature of Apprentice	Date

**PLEASE RETURN TO: ALBAT Program,
PO Box 370
Medway, OH 45341-0370**