



PURPOSE

To provide for a standardized format on which employers can rate the employee/individual monthly progress in training of essential duties as referenced in paragraph 2 of the On-The-Job Training Agreement and the Modified On-The-Job Training (OJT) Agreement and as required in paragraph 3 of both agreements.

The form can also serve as the employer's bill or invoice requesting Agency reimbursement for the period of training as agreed upon in paragraph 1 of both agreements. Progress must be formally monitored at least monthly, however, can be formally monitored on a more frequent basis as the individual and employer's needs dictate.

PREPARED BY

Individual/Employee's Employer

INSTRUCTIONS

For: Enter the employee/individual/trainee name (first name, middle initial and last name).

From: Enter the employer's full company name

Completed by: Enter the name of the responsible employer party completing the form (first name, middle initial and last name).

Date: Enter two-digit month, two-digit day and four-digit year for the date of form completion.

Period Covered by Report: Enter two-digit month, two-digit day and four-digit year for the beginning date for the period covered by the report.

To: Enter the two-digit month, two-digit day and four-digit year for the ending date for the period covered by the report.

Skill 1: Enter the essential skill functions for which training was provided and as referenced in the OJT or Modified OJT Agreement, paragraph 2.

Skill 2: Enter the essential skill functions for which training was provided and as referenced in the OJT or Modified OJT Agreement, paragraph 2.

Skill 3: Enter the essential skill functions for which training was provided and as referenced in the OJT or Modified OJT Agreement, paragraph 2.

Skill 4: Enter the essential skill functions for which training was provided and as referenced in the OJT or Modified OJT Agreement, paragraph 2.

Skill 5: Enter the essential skill functions for which training was provided and as referenced in the OJT or Modified OJT Agreement, paragraph 2.



ON-THE-JOB TRAINING PROGRESS REPORT INSTRUCTIONS

Additional Skill/Requirements: Enter any additional skills or requirements as referenced on OJT or Modified OJT Agreement

Employer, please rate above skill attainment as follows: Employer enters a score for each skill item as stipulated on the form.

Please reimburse: Enter the total number of hours of OJT provided for the reporting period

Hours of OJT for the period: Enter the two-digit month, two-digit day and four-digit year for the beginning date of the reporting period

To: Enter the two-digit month, two-digit day and four-digit year for the ending date of the reporting period

Employer signs and dates the document.

DISTRIBUTION

Original: Vocational Rehabilitation Counselor
Copies: Case Record