

Training Special Provision Monthly On-the-Job Training Report

Sheet of.....

Contractor: <i>(Name and Address)</i> 21			INSTRUCTIONS: This report must be submitted each month directly to the Highway Civil Rights Office. Send a copy to the Project Manager for inclusion in the monthly progress estimate and also keep a copy for your records. Note: The Remarks column is to be used for reporting when a trainee completes training, terminates employment or is replaced by another trainee.		
SUBMIT TO: NDOR Highway Civil Rights Office 1500 Highway 2 • P.O. Box 94759 • Lincoln, NE 68509-4759			Month and Year:	Project No.: NDOR Project Manager:	
TRAINEE NAME AND SOCIAL SECURITY NUMBER <i>(one Trainee per line)</i>	WORK CLASSIFICATION	WAGE RATE PAID	TOTAL HOURS TRAINED THIS MONTH	REMARKS	
Contractor's Representative: <i>(Signature and Title)</i>		Date:	NDOR External Civil Rights Office: <i>(Signature and Title)</i>		Date: