AIR CONDITIONING, REFRIGERATION &
PIPEFITTING EDUCATION COMMITTEE
13201 NW 45th Ave. • Opa-Locka (Miami), FL 33054
(305) 685-0311 Fax (305) 685-1169

APPRENTICE RELATED AND WORK EXPERIENCE FORM

REPORTING PERIOD

Month _____ Yr. _____

Related Instruction Class

Hrs.															
Date															

Name_____ Contractor_____

INSTALLATION WORK

WORK EXPERIENCE	*CIRCLE WEEKEND DAYS Day 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	① Total
A. PVC Piping																																
B. Copper Piping																																
C. Weld Piping																																
D. Victaulic Piping																																
E. Screw Piping																																
F. Placing Equipment																																
G. Controls / Start Up																																

SERVICE WORK

	*CIRCLE WEEKEND DAYS Day 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	① Total
A. Refrigeration / Ice Machines																																
B. Residential Cooling / Heating																																
C. Commercial Cooling / Heating																																
D. Industrial Process Cooling																																
E. Preventative Maintenance																																
F. Other (Explain)																																
② TOTAL HOURS WORKED																																
③ HOURS WORKED WITH A JOURNEYMAN SUPERVISOR																																

① TOTAL ALL CATEGORIES IN RIGHT HAND COLUMN
② TOTAL ALL HOURS WORKED PER DAY
③ HOURS WORKED PER DAY WITH A JOURNEYMAN SUPERVISOR

TOTAL HOURS _____