



Golden Gate Chapter

# On-The-Job Trainer (Journeyman) Evaluation

(Apprentice – Please complete on your current or most recent On The Job Training journeyman)

**Company Name:** \_\_\_\_\_

**Name of Trainer (Journeyman):** \_\_\_\_\_

**Trainer has supervised me from:** \_\_\_\_\_ **to:** \_\_\_\_\_

1. Were safety measures adhered to on the job site? If the answer is no, what safety violations did you witness and what steps did you take to address them with your company?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Did your trainer demonstrate the use of the required tools used on the project? If not, did you discuss this with your supervisor?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Was the use of personal protective equipment required on the jobsite? Did your company provide you with personal protective equipment?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Were you able to communicate easily with trainer in order to ask questions? If not, what steps did you take in order to address this issue with your company?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Were you given ample opportunity to learn the required work processes and were your assignments based on your need for required work processes? Did you review your OJT Hours with your supervisor to communicate the areas where you need experience in?

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6. Was your trainer knowledgeable in your trade? If not, what specific area(s) was your trainer lacking knowledge in?

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7. Was there a trainer with you on all of your jobs? If not, what steps did you take to address this issue with your company?

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8. Did you receive your pay in a timely manner? If not, what steps did you take to address the situation with your company?

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9. Did you receive your break and meal periods each day? If not, what steps did you take to address the situation with your company?

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Please feel free to add any additional comments you have. For additional space you may use the back page or attach a separate sheet:

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APPRENTICE NAME: \_\_\_\_\_

Apprentice Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail completed form to the chapter office:**

**Associated Builders & Contractors  
Golden Gate Chapter  
4577 Las Positas Road Unit C  
Livermore, CA 94551**

You may also fax the form to (925) 416-0974 or email to [sagit@abc-ggc.org](mailto:sagit@abc-ggc.org)