

INCENTIVE PLAN CLAIM FORM



APPRENTICE NAME _____

DATE SUBMITTED _____

PART 1: CHECK EACH STATEMENT THAT APPLIES TO THE SCHOOL YEAR YOU JUST COMPLETED:

_____ No more than 2 school absences have been recorded for me this past school year (each tardy or early departure counts as ½ of an absence.)

_____ No more than 2 work reports have been recorded as "late" from September 1st of last year through August 31st of this year.

_____ I have attended at least 4 union meetings this past school year or I am a 1st or 2nd year apprentice.

PART 2: IF ALL STATEMENTS ABOVE ARE CHECKED, CONTINUE BY ENTERING YOUR YEAR END POINT TOTAL FOR EACH CATEGORY.

Processor Initials

_____ Attendance (60 minus any full or half absences this year.) _____

_____ Work Reports (12 minus any late work reports this year.) _____

_____ Test Score (Number of test scores greater than 84% this year.) _____

_____ Union Meetings (Number of recorded union meetings attended this year.) _____

_____ JATC/212 Service (Number of recorded service events up to 5.) _____

_____ Community Service (Number of recorded service events up to 2.) _____

_____ Blood Drive (1 point if donated blood at JATC Blood Drive.) _____

_____ **Total Points**

PART 3: ENTER A CHECKMARK NEXT TO YOUR APPRENTICE SCHOOL YEAR YOU JUST COMPLETED. IF TOTAL POINTS MEET OR EXCEED THE MINIMUM LISTED, SIGN THE FORM AND SUBMIT TO THE JATC OFFICE.

_____ Year 1 (78 points minimum)

_____ Year 2 (80 points minimum)

_____ Year 3-5 (90 points minimum)

I certify that the above information is true.

(Signature of Apprentice)

FOR JATC OFFICE USE ONLY	
Processed by:	_____
Part 1:	_____ Part 2: _____
Part 3:	_____
Approved:	_____
Denied:	_____