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| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **NAME** (*contractor*) | | | | **COUNTY** | **FED/STATE PROJECT #** | | | **CONTRACT ID** | | **NAME** (*trainee*) | | | | | **SSN** (*last four digits*) | | | **WAGE** (*per hour*) | | **CLASSIFICATION** | | | | |  | | |  | | **ETHNIC GROUP** (*Check one.*) | | | | | | | | | |  | American Indian or Alaskan Native | | | | | | | | |  | Asian or Pacific Islander  Black | | | | | | | | |  | Hispanic  Other: | | | | | | | | | **GENDER** (*Check one.*) | | | | | | | | | |  | Male  Female | | | | | | | | | **DATE** (*training started*) | | | **Reporting Hours in Accordance with Individual Training Program** | | | | | | | **TRAINING CATEGORY** | | **PHASE I** | | **PHASE II** | | **PHASE II** | **TOTALS** | | | **HOURS TRAINED**  **THIS WEEK** | |  | |  | |  |  | | | **HOURS REQUIRED** | |  | |  | |  |  | | | **TOTAL HOURS TRAINED** | |  | |  | |  |  | | | **TRAINING HOURS REMAINING** | |  | |  | |  |  | | | **REMARKS/WEEK ENDING** | | | | | | | | | | **PREPARED BY** | | | | **TITLE** | | | | **DATE** | | Return completed form to: Division of Construction Procurement, 3rd Floor West, 200 Mero Street, Frankfort, KY 40622 | | | | | | | | | |