On-the-Job Training (OJT)/Work Experience (WEX) Local Monitoring Report

OJT/WEX Information

Employer:

Employer FEIN:

Site Address:

City: State: ZIP:

Trainer/Supervisor:

Title: Phone:

Email:

Trainee: Reviewer:

Contract dates: From to Date of review:

Monitoring Summary

Supervisor interview:		Complete	Notes:	
Trainee interview:		Complete	Notes:	
Reviewer report and observations:		Complete	Notes:	
Technical assistance provided:		Yes	No	Notes:
Corrective action required:		Yes	No	Notes:

Trainee's Interview Sheet

1. **Training Plan**
   a. Do you have a copy of your Training Plan? Yes ☐ No ☐
   b. Does it match the job you are doing? Yes ☐ No ☐
   c. Are you receiving the type of training specified in the Training Plan? Yes ☐ No ☐

Comment(s):

2. **Supervision**
   a. Who is training you (i.e., your supervisor, co-worker, specialized trainer)?
   b. Who assigns your work?
   c. How much time does your trainer/supervisor spend with you during the day?
   d. Does your trainer/supervisor explain your assignments and give you help if needed? Yes ☐ No ☐
   e. Does your trainer/supervisor review your job performance with you? Yes ☐ No ☐
   f. Does your trainer/supervisor review the monthly progress reports with you? Yes ☐ No ☐

Comment(s):

3. **Time and Attendance**
   a. How many hours per week are you working?
   b. How much are you paid?
   c. How are your work hours tracked (e.g., sign-in, punch a clock)
   d. Are you paid regularly and in a timely fashion? Yes ☐ No ☐

Comment(s):

4. **General**
   a. Do you believe the training site is easily accessible, safe, and friendly? Yes ☐ No ☐
   b. Do you have any problems with your job? Yes ☐ No ☐
   c. Are you getting along with your co-workers and trainer/supervisor? Yes ☐ No ☐
   d. Is there anything particular you like or dislike about your job? Yes ☐ No ☐
      Comment:
   e. Is there anything else you would like to share with me about your experience? Yes ☐ No ☐
      Comment:

Comment(s):

Supervisor's Interview Sheet

Supervisor interviewed:

Supervisor job title:

Interview date: Interview location:

1. **Training Plan**
   a. Do you have a copy of the contract? Yes ☐ No ☐
   b. Do you review the trainee's progress report with the trainee? Yes ☐ No ☐
   c. Do the trainee's work assignments comply with the Training Plan? Yes ☐ No ☐
   d. Is the Training Plan being followed? Yes ☐ No ☐
   e. How is the trainee's safety and well-being ensured?
      Explain:

Comment(s):

2. **Time Records**
   a. How are the trainee's work hours tracked? (Person monitoring should review current time card/sheets.)
      Explain:
   b. How would you describe the trainee's attendance and punctuality?
      Describe:
   c. What is the trainee's hourly rate of pay?

Comment(s):

3. **General**
   a. Is the trainee performing his/her work assignments satisfactorily? Yes ☐ No ☐
   b. Do you have any concerns about the trainee? Yes ☐ No ☐
   c. Do you have any concerns about the contract? Yes ☐ No ☐
   d. In general, are you satisfied with the contract? Yes ☐ No ☐

Comment(s):

Reviewer Report and Observations

1. **Perception of Plant/Facility**
   a. Were all equipment, materials, etc. found in working order and in sufficient quality? Yes ☐ No ☐
   b. Were they up to date? Yes ☐ No ☐
   c. In your opinion, is the work/training site unsanitary, hazardous, or dangerous to the trainee's health or safety? Yes ☐ No ☐
   d. Is there sufficient space for training activities? Yes ☐ No ☐
   e. Are there any other health/safety issues? Yes ☐ No ☐
   f. If applicable, has appropriate accommodation been made for a trainee covered under the Americans with Disabilities Act? Yes ☐ No ☐

Comment(s):

2. **Training Content**
   a. Is the schedule being followed according to the contract? Yes ☐ No ☐
   b. If not, do the changes conform to the approved Training Plan and the total number of training hours specified in the contract? Yes ☐ No ☐
   c. Does the trainee's hourly wage match the contract? Yes ☐ No ☐
   If not, explain:

Comment(s):

3. **Attendance**
   a. Is there any attendance or punctuality issues? Yes ☐ No ☐
   If yes, what methods are being employed to address the issues?
   Explain:

Comment(s):

4. **Teaching Methods**
   a. Is the instructional method as described in the Training Plan being implemented? Yes ☐ No ☐
   b. Are the training hours as described in the training plan sufficient for each task? Yes ☐ No ☐
   c. Is the agreed-upon method of evaluation being used? Yes ☐ No ☐
   d. Is skill level being successfully attained? Yes ☐ No ☐
   e. Does the trainer appear motivated and competent? Yes ☐ No ☐
   f. Does the trainee appear attentive and interested? Yes ☐ No ☐
   g. Is native language of trainee spoken by trainer? Yes ☐ No ☐
   h. Is trainee paid in a timely fashion? Yes ☐ No ☐

Comment(s):

5. Reports

a. Is the employer submitting required monthly progress reports in a timely fashion? Yes ☐ No ☐

b. Is the employer submitting invoices in a timely fashion? Yes ☐ No ☐

c. If not, what corrective actions are in place to address this issue?
Explain:

Comment(s):

6. WIOA Regulations Compliance

a. Are any WIOA dollars being used for political activities? Yes ☐ No ☐

b. Are any WIOA dollars being used to aid or deter union organizing or collective bargaining? Yes ☐ No ☐

c. Are any WIOA dollars being used to promote any sectarian or religious activities? Yes ☐ No ☐

d. Are any WIOA trainees being charged any fees for any service? Yes ☐ No ☐

Comment(s):

7. Summary

Was technical assistance provided or necessary? Yes ☐ No ☐
If yes, explain:

Is corrective action required? Yes ☐ No ☐
If yes, explain:

Print/type reviewer name

Reviewer signature

Date