



Apprentice Trainee Wage Rate Info

Name of Trainee: _____ Current Level: _____

Apprentice ID: _____

Certification Date: _____ Void after 90 days

Registration Date: _____

Classification: _____ Ratio _____ to _____

Hourly Base Rate of Pay \$ _____ Fringe Benefit \$ _____ Wage Total \$ _____

Program Name: _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Wage Rates: \$ _____ % _____ Level _____

Expected Promotion to Next Level: _____

Expected Graduation to Journeyman: _____

Amount of Fringe Benefits Applied. (i.e. medical, dental, 401K etc. Identify in chart below)

Fringe Benefit	\$\$ / Rate Per Hour	Fringe Benefit	\$\$ / Rate Per Hour
Medical			
Dental			
Vacation			
Sick			
Holiday			

Contact Person _____ Phone _____ E-mail _____