the
Chickasaw Nation
Division of Education
Vocational Rehabilitation
300 Rosedale Road / Ada, OK 74820 / (580) 421-7711 / TFN: (888) 436-0553 / Fax: (580) 436-0830 / TDD: (580) 310-9634
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Bill Anoatubby
Governor

ON-THE-JOB TRAINING MONTHLY PROGRESS REPORT

Consumer name:		**Case number:**	
County:		**Counselor:**	

Trainee work performance:

Work habits	Yes	No
Does the trainee arrive to work on time?	☐	☐
Does the trainee work through his scheduled work day?	☐	☐
Does the trainee arrive to work neat/clean as expected?	☐	☐
Does the trainee follow instructions well?	☐	☐
Does the trainee complete work assignments as expected?	☐	☐
Does the trainee show initiative?	☐	☐
Does the trainee follow all work rules?	☐	☐
Does the trainee work well with co-workers?	☐	☐
Does the trainee work well with his/her supervisor?	☐	☐

Please list any comments about the trainee's work habits:

Please list the job skills that the trainee has worked on and whether the trainee has acquired each skill:

Job skill	Need further training	Has acquired job skills

Would you like to meet with the CNVR counselor for any reason?

Signature of trainer **Date** **Signature of trainee** **Date**