International Brotherhood of Boilermakers Local Lodge 146

JOB STEWARD REPORT

Phone: (780) 451-5992 Fax: (780) 451-3927

PLEASE PRINT

JOB STEWARD INFORMATION		DATE (mm/dd/yy)
FIRST NAME	LAST NAME	SOCIAL INSURANCE NO. (SIN)
CONTRACTOR	SITE	LOCATION

FOR THE MONTH OF (☑)

☐ JANUARY ☐ FEBRUARY ☐ MARCH ☐ APRIL ☐ MAY ☐ JUNE

EXCUSED FROM MEETING

☐ YES ☐ NO ☐ JULY ☐ AUGUST ☐ SEPTEMBER ☐ OCTOBER ☐ NOVEMBER ☐ DECEMBER

PLEASE LIST FOREMAN (NAME & CLASSIFICATION)

1		CLASS:
2		CLASS:

WORK DETAILS

# OF WELDERS	# OF RIGGERS	# OF FITTERS	# OF 1ST YEAR	# OF 2ND YEAR	# OF 3RD YEAR

SHIFT WORKED (☑)

☐ DAYS ☐ AFTERNOONS ☐ NIGHTS

TYPE OF WORK

COMMENTS/DISPUTES

SIGNATURE	DATE SIGNED (mm/dd/yy)

OVER PLEASE

SAFETY REPORT

PLEASE PRINT

WEEKLY SAFETY MEETING (☑) ☐ YES ☐ NO	DATE (mm/dd/yy)	
CHAIRED BY:	# OF INCIDENTS	# OF ACCIDENTS

NATURE OF INCIDENTS/ACCIDENTS

COMMENTS

TOOL BOX MEETINGS (☑) ☐ *YES* ☐ *NO*

	TOPICS	PRESENTED BY	CLASSIFICATION
1			
2			
3			
4			

SIGNATURE	DATE SIGNED (mm/dd/yy)

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