

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
ON THE JOB TRAINING SCHEDULE

275-020-96
EQUAL OPPORTUNITY OFFICE
04/12

SECTION 1: PROJECT IDENTIFICATION													
1. Financial Project No.:		2. F.A.P. No.:		3. Contract No.		4. County:		5. District		6. Contractor Name		7. FEID No.	
8. Name of Training Program		9. Revision No. (Original = 0)		10. Total No. Trainees Required		11. Total Banking Certificates used to fulfill No. Trainees Required				12. Original No. Contract Days		13. Estimated Mo/Yr of Project Completion	
<input type="checkbox"/> FDOT/ FTBA <input type="checkbox"/> Other: specify below													

SECTION 2: Schedule of Training by Classification		2	4	6	8	1	1	1	2	2	2	2	2	3	3	3	3
		0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0
Training Classification																	
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																
	M/D/Y																

SECTION 3: SIGNATURES				
14. SUBMITTED BY: CONTRACTOR'S SIGNATURE/DATE		15. CONCURRENCE OF PROJECT ADMINISTRATOR		16. CONCURRENCE/APPROVAL OF DIST. CONTRACT COMPLIANCE MGR
		DATE		DATE

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Section 2: Schedule of Training by Classification		3	4	4	4	4	4	5	5	5	5	5	6	6	6	6	6	7	7		
		8	0	2	0	0	0	0	2	4	6	8	0	2	4	6	8	0	2		
Training Classification																					
	M/D/Y																				
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Section 2: Schedule of Training by Classification

[illegible]

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Section 2: Schedule of Training by Classification		1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	2	2	2
Training Classification		8	8	8	8	9	9	9	9	9	0	0	0	0	0	0	0	0	0
M/D/Y		2	4	6	0	0	2	0	0	0	0	2	4	0	6	8	0	1	2
0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	M/D/Y																		
	M/D/Y																		
	M/D/Y																		
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