

OJT LETTER OF INTENT

Project name: _____ Project Location: _____

Contractor Name _____ anticipates training in the classifications listed and expect to start each on the below given dates (must reflect total training hours assigned to project):

1. _____ Date: _____
2. _____ Date: _____
3. _____ Date: _____

Report of employment statistics for the entire Company workforce, by hours worked for each craft between April 1 and November 15 for the last calendar year.

Position	Total Employees	White Males	Females	Hispanic	American Indian	Black	Asian	Disabled	# Of Recalls
Superintendent									
Operating Engineer									
Equipment Operator									
Mechanics									
Truck Drivers									
Ironworker/Rod									
Carpenters									
Const. Wkr. Bridge									
Const. Wkr. Hwy.									
Pipelayer									
Bridge Maint. Wkr.									
Laborer, Semi-Skill									
Laborer, Unskilled									
Forepers /Brdge									
Foreperson/Hw									
Welder									

Approved by _____ Date: _____

SUBMIT PRIOR TO START OF PROJECT

SUBMIT TO: MaineDOT, Civil Rights Office
 State House Station # 16
 Augusta, Maine 04333-0016
 Tel (207) 624-3036
 Fax (207) 624-3021
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