



## On-the- Job Training Plan

**Company:** \_\_\_\_\_ **Employer Contact:** \_\_\_\_\_  
**Employee:** \_\_\_\_\_ **Position:** \_\_\_\_\_  
**No. of Weeks:** \_\_\_ **No. of Hours:** \_\_\_\_\_ **OJT Start Date:** \_\_\_\_\_ **OJT Ending Date:** \_\_\_\_\_

1. The **Tasks** to be learned and the specific **Competency Based Skills** to be attained.
2. Estimated number of **Hours** to perform each Task. The total number of hours should equal the length of the OJT contract.
3. The **Instructional Method(s)** to be used for each Task. Enter the appropriate **Letter(s)** from the following:  
**V=Verbal/Written Instruction S=Shadowing Trainer W=Supervised Direct Work A= Assigned Readings**
4. The **Evaluation Method** to measure employee progress in attaining the skills competency from the following:  
**D= Observable Demonstration P= Product Review Q= Meets Performance Quota/Standard**

**Tasks identified in the Training Plan are occurring concurrently and not sequentially.**

Tasks	Competency Based Skills	Est. Hours	Instructional Method	Evaluation Method
			(Please see Instructional Method above)	(Please see Evaluation Method above)

<b>Tasks</b>	<b>Competency Based Skills</b>	<b>Est. Hours</b>	<b>Instructional Method</b>	<b>Evaluation Method</b>

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