

**Ministry of Labour and Human Resources
Department of Employment & Human Resources**

YELP Logbook

The Youth Engagement and Livelihood Program

Participant & Placement Information

Name of Participants:	Sector:
Citizenship ID card No: Jobseeker No:	Engaged position:
Address:	
Village:	Geog:
Dungkhag:	Dzongkhag:
Contact no:	
Address of Parent/Guardian:	
*Saving A/c No:	

**The candidate must open Saving A/c and submit to the YELP coordinator.*

Information on Enterprise:

Name of Company:	
Contact Number:	Email Id:
Address:	

The purpose of the logbook:

The logbook is a valuable document that contains a record of skills and knowledge achieved by you during your apprenticeship training period.

The purpose of this logbook is to keep record of the skills and knowledge/competencies achieved by you in specific occupation during your attachment with the Skilled Supervisor (SS).

The logbook will provide all users with a record of:

1. The status of the skills and knowledge/competencies achieved;
2. How, when and where this skills and knowledge/competencies has been achieved;
3. Who has been involved in providing and assessing the training.

Instructions to Maintain the Log Book

You have the main responsibility for maintaining this logbook.

1. As credit will be given to you at the end of the training, you must maintain the logbook daily; keep it safe, neat and clean.
2. It is important that daily entries should be made at the end of the day and submit to your skilled supervisor every week for verification and comments
3. Daily entries should indicate as clearly as possible various work performed by you
4. Indicate problems encountered every day in workplace and discuss with your supervisor to solve the problem.
5. The logbook should be available for inspection whenever called for by any authorized officer from the Department of Employment and Human Resources.
6. Your performance will be assessed by the supervisor through the performance evaluation sheet end of the training, therefore, submit the performance evaluation sheet must be submitted to the Department at the end of training.

Thank you

Record of Daily Activities

Month: _____

Date	Brief Description of work carried out	Remarks/ signature of Supervisor
<p>Problem encountered (If any)</p> <ol style="list-style-type: none">1.2.3.		

Record of Daily Activities

Month: _____

Date	Brief Description of work carried out	Remarks/ signature of Supervisor

Problem encountered (If any)

- 1.
- 2.
- 3.

Record of Daily Activities

Month: _____

Date	Brief Description of work carried out	Remarks/ signature of Supervisor

Problem encountered (If any)

- 1.
- 2.
- 3.

Record of Daily Activities

Month: _____

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Date	Brief Description of work carried out	Remarks/ signature of Supervisor

Problem encountered (If any)

- 1.
- 2.
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Record of Daily Activities

Month: _____

Date	Brief Description of work carried out	Remarks/ signature of Supervisor

Problem encountered (If any)

- 1.
- 2.
- 3.

Performance Evaluation form to be evaluated on quarterly basis

Review Period: from ____ / ____ /201____ to ____ / ____ / ____

Ratings					
Rate from a score of 1 to 5	Needs Improvement (score Value -1)	Below Expectation (score value- 2)	3- Meets Expectation (score value - 3)	4-Exceeds Expectation (score value - 4)	5- Outstanding (score value - 5)
Job Knowledge (tick)					
Comments if any;					
Work Quality (tick)					
Comments if any;					
Attendance/punctuality (tick)					
Comments if any;					
Initiative (tick)					
Comments if any;					
Communication Skills (tick)					
Comments if any;					
Attitude (tick)					
Comments if any;					
Dependability (tick)					
Comments if any;					

Overall Ratings (average of the above ratings, Total rating / 7) :

- 1 : Needs Improvement 2 : Below Expectation
 3 : Meets Expectation 4 : Exceeds Expectation
 5 : Outstanding

Evaluation

Additional Comments, if any

Goals/targets achievement

Employer's Signature and seal (Evaluator):

Date: ____ / ____ /20__

Performance Evaluation form to be evaluated on quarterly basis

Review Period: from ____ / ____ /201____ to ____ / ____ / ____

Ratings					
Rate from a score of 1 to 5	Needs Improvement (score Value -1)	Below Expectation (score value- 2)	3- Meets Expectation (score value - 3)	4-Exceeds Expectation (score value - 4)	5- Outstanding (score value - 5)
Job Knowledge (tick)					
Comments if any;					
Work Quality (tick)					
Comments if any;					
Attendance/punctuality (tick)					
Comments if any;					
Initiative (tick)					
Comments if any;					
Communication Skills (tick)					
Comments if any;					
Attitude (tick)					
Comments if any;					
Dependability (tick)					
Comments if any;					

Overall Ratings (average of the above ratings, Total rating / 7) :

- 1 : Needs Improvement 2 : Below Expectation
 3 : Meets Expectation 4 : Exceeds Expectation
 5 : Outstanding

Evaluation

Additional Comments, if any

Goals/targets achievement

Employer's Signature and seal (Evaluator):

Date: ____ / ____ /20____

Attendance Sheet

Name: _____ BoB Ac/no _____ CID.no _____

Note: The office will release the allowance only upon receiving this form duly signed by the skilled supervisor.

Month	Date																															Signature of Supervisor & Company Seal				
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	29	30	31						
January																																				
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September																																				
October																																				
November																																				
December																																				

Name of the Company: _____ Signature of Skilled supervisor: _____ Date: _____

Attendance Sheet

Name: _____ BoB Ac/no _____ CID.no _____

Note: The office will release the allowance only upon receiving this form duly signed by the skilled supervisor.

Month	Date																															Signature of Supervisor &Company Seal
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	29	30	31		
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Name of the Company: _____ Signature of Skilled supervisor: _____ Date: _____