Internship Program Work Hours Log

Please print or type legibly. Turn in form to your faculty coordinator at the end of your internship.

Intern				Term					
Internship Site									_
Week Beginning	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.	Total	-
									-
									-
	N								
is is									
									_
									_
Fotal Hours Worked verify that the hours list ntern's Signature	ted above o	are accura	te.			_Date			
Supervisor's Signature _						_Date			
	Career								
	Center								