**Weekly Hours Form**

|  |  |
| --- | --- |
| Student Name |       |
| Placement Location |       |
| Supervisor Name |       |
| Supervisor Contact Information |       |
| Grading Period |       | Week |       |
|  |  |
| Monday | Date: |       | Hours Completed: |       |
| My responsibilities today and what I learned from my experience: |
|       |
| Tuesday | Date: |       | Hours Completed: |       |
|       |
| Wednesday | Date: |       | Hours Completed: |       |
|       |
| Thursday | Date: |       | Hours Completed: |       |
|       |
| Friday | Date: |       | Hours Completed: |       |
|       |
| Saturday | Date: |       | Hours Completed: |       |
|  |
| Sunday | Date: |       | Hours Completed: |       |
|  |
| Supervisor Signature: |  |
| Comments: |       |