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# **INTERNSHIP TIME SHEET**

# Cooperative Work Experience Education (CWEE)

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|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UNPAID Internship** | | | |  | **PAID Internship** | | | |
| 60hrs=1unit | 120hrs=2units | 180hrs=3units | 240hrs=4units | 75hrs=1unit | 150hrs=2units | 225hrs=3units | 300hrs=4units |

COMPLETE THIS

           

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Student Name *(Last Name, First Name)*** |  | **SWC ID** |  | **Employer/Agency** |

**CWEE Instructor** **Course** **Semester & Year Inclusive Dates Covered**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Week 1** | | **Week 2** | | **Week 3** | | **Week 4** | | **Week 5** | | **Week 6** | | **Week 7** | | **Week 8** | | **Week 9** | |
| Day | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked |
| **Monday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Tuesday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Wednesday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Thursday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Friday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Saturday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Sunday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Weekly Totals: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**WEEK 1-9 TOTAL HRS WORKED:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Week 10** | | **Week 11** | | **Week 12** | | **Week 13** | | **Week 14** | | **Week 15** | | **Week 16** | | **Week 17** | | **Week 18** | |
| Day | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked | Date | Hours Worked |
| **Monday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Tuesday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Wednesday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Thursday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Friday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Saturday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Sunday** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Weekly Totals: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**WEEK 10-18 TOTAL HRS WORKED:**

**Student Signature & Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Supervisor Signature & Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: This time card must be submitted along with CWEE contract and consultation form; which is due the last week of the semester.

TO:

STUDENT EMPLOYMENT SERVICES  
 Cesar E. Chavez, Bldg. 1400, 2nd Floor, Room S208 | Office: 619.482.6356 REV 6/12/18 SES\_PRE-CWEE