



STUDENT TIMESHEET

Instructions: Fill in your timesheet each week. Submit your completed timesheet (with signature from your site supervisor) to the CWE Program Manager (mbateman@clatsopcc.edu) at the end of the term.

STUDENT NAME	STUDENT ID #			
SITE (COMPANY NAME)	SITE SUPERVISOR (FIRST & LAST NAME)			
TRAINING START DATE	TRAINING END DATE	HOURS/TERM	# OF CREDITS	TERM (SU, F, W, SP)

Week	Total Hours	Jobs Performed <small>(Report what you did, what equipment you used, what you accomplished, what skills you developed or used)</small>	Supervisor Initial
Week 1			
Week 2			
Week 3			
Week 4			
Week 5			
Week 6			
Week 7			
Week 8			
Week 9			
Week 10			
Week 11			
Total Hours		<small>(Total hours must show minimum required for the credits taken)</small>	

(33 hours of work equals one credit)

STUDENT SIGNATURE (VERIFYING HOURS WORKED)	DATE
SUPERVISOR SIGNATURE (VERIFYING HOURS WORKED)	DATE