

**Employer Verification of Student Work Hours**

Student: \_\_\_\_\_  
Employer: \_\_\_\_\_

**Due: Monday, June 6, 2011**

- Capstone WBL Program  
 Work Study Program

Week One	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total HRs
<i>May 22, 2011</i>								
	<i>Tasks completed this week:</i>							<i>Student initials</i>

Week One	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total HRs
<i>May 29, 2011</i>								
	<i>Tasks completed this week:</i>							<i>Student initials</i>

*I certify that the hours reported above are true and accurate.*

Supervisors  
Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Sheet 10

**Note:** *Completion of all fields is required. This task is to be completed by the student learner and only requires an employer signature.*