

Employer Verification of Student Work Hours

Student: _____
Employer: _____

Due: Tuesday, November 2, 2010

- Capstone WBL Program
 Work Study Program

| Week One | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Total HRs |
|--------------------|----------------------------|--------|---------|-----------|----------|--------|----------|------------------|
| October 3, 2010 | | | | | | | | |
| | Tasks completed this week: | | | | | | | Student initials |

| Week One | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Total HRs |
|---------------------|----------------------------|--------|---------|-----------|----------|--------|----------|------------------|
| October 10, 2010 | | | | | | | | |
| | Tasks completed this week: | | | | | | | Student initials |

| Week One | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Total HRs |
|---------------------|----------------------------|--------|---------|-----------|----------|--------|----------|------------------|
| October 17, 2010 | | | | | | | | |
| | Tasks completed this week: | | | | | | | Student initials |

| Week One | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Total HRs |
|---------------------|----------------------------|--------|---------|-----------|----------|--------|----------|------------------|
| October 24, 2010 | | | | | | | | |
| | Tasks completed this week: | | | | | | | Student initials |

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

Supervisors
Signature: _____

Date: _____

Sheet 2

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