

Employer Verification of Student Work Hours

Student: _____
Employer: _____

Due: Tuesday, March 1, 2011

- Capstone WBL Program
 Work Study Program

Week One	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total HRs
<i>January 30, 2011</i>								
	<i>Tasks completed this week:</i>							<i>Student initials</i>

Week One	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total HRs
<i>February 6, 2011</i>								
	<i>Tasks completed this week:</i>							<i>Student initials</i>

Week One	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total HRs
<i>February 13, 2011</i>								
	<i>Tasks completed this week:</i>							<i>Student initials</i>

Week One	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total HRs
<i>February 20, 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: _____

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