INTERNSHIP TIME SHEET

Loyola University New Orleans

Student Intern

Minimum of 120 hours required

Intern Name: _____

Internship Organization: _____

Semester Interning: _____

DATE RANGE dd/mm/yy-dd/mm/yy	**MONDAY** Hours Worked	**TUESDAY** Hours Worked	**WEDNESDAY** Hours Worked	**THURSDAY** Hours Worked	**FRIDAY** Hours Worked	**WEEKEND** Hours Worked	**TOTAL HOURS**	**SUPERVISOR'S INITIALS**

_____ _____

Intern's Signature *Date*

_____ _____

Internship Supervisor's Signature *Date*