

**Internship //  
Independent Study  
TIMESHEET**

Name: \_\_\_\_\_

Coyote ID: \_\_\_\_\_

Units: \_\_\_\_\_

\_\_\_\_\_  
MONTH AND YEAR

\_\_\_\_\_  
STUDENT JOB TITLE

\_\_\_\_\_  
DEPARTMENT

Current Unit Enrollment:

I certify that I have not worked hours without my Supervisor's prior approval. I have worked the number of hours listed and am currently enrolled in the number of units indicated above.

\_\_\_\_\_  
Student's Signature                      Date

\_\_\_\_\_  
Supervisor's Signature                      Date

\_\_\_\_\_  
Supervisor's Printed Name

Week 1	Date	Start	End		Start	End	Hours
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

Weekly Total:

Week 2	Date	Start	End		Start	End	Hours
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

Weekly Total:

Week 3	Date	Start	End		Start	End	Hours
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

Weekly Total:

Week 4	Date	Start	End		Start	End	Hours
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

Weekly Total:

Week 5	Date	Start	End		Start	End	Hours
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

Weekly Total:

**Total Hours for the month:**