



FLORIDA INTERNATIONAL UNIVERSITY

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Student Name _____

Internship Site _____ Supervisor's Name _____

Weekly Internship Timesheet

	Date	Time In	Time Out	Brief Description of Duties Performed	Total Hours
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Total Hours Worked This Week					

Student's Signature _____ Date _____

Supervisor's Signature _____ Date _____

Comments: _____
