



**Saint Martin's** INTERNSHIP SITE: \_\_\_\_\_  
**UNIVERSITY** SITE SUPERVISOR: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date Start: \_\_\_\_\_

Academic Period: \_\_\_\_\_ Date End: \_\_\_\_\_

<b>DATE</b>	<b>HOUR TYPE (direct, indirect)</b>	<b>INDIVIDUAL OR GROUP</b>	<b>TIME PERIOD(S)</b>	<b>TOTAL</b>	<b>NOTES</b>



**Saint Martin's**  
UNIVERSITY

**INTERNSHIP SITE:** \_\_\_\_\_

**SITE SUPERVISOR:** \_\_\_\_\_

Student Name: \_\_\_\_\_ Date Start: \_\_\_\_\_

Academic Period: \_\_\_\_\_ Date End: \_\_\_\_\_

DATE	HOUR TYPE (direct, indirect)	INDIVIDUAL OR GROUP	TIME PERIOD(S)	TOTAL	NOTES
				<b>FINAL TOTAL:</b>	

By signing this timesheet I certify that I have carefully reviewed this information and that the documented hours and information reported is accurate.

**SUPERVISOR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**STUDENT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_