

TIME CARD 2 Weeks 9-18 – Spring 2020
50 points. Required to pass course. **Due: May 6 by noon.**
NOT ACCEPTED LATE!

OCED 90

PAID UNPAID 91 #OCED Units: 1 2 3 4 5 6

STUDENT'S NAME: _____

STUDENT'S PHONE #: _____

COMPANY: _____

ADDRESS: _____

SUPERVISOR: _____

SUPERVISOR PHONE#: _____

Indicate total hours worked each week.

	WEEK 9	03/09-03/15	_____		WEEK 15	04/20-04/26	_____
**	WEEK 10	03/16-03/22	_____		WEEK 16	04/27-05/03	_____
	WEEK 11	03/23-03/29	_____		WEEK 17	05/04-05/10	_____
	WEEK 12	03/30-04/05	_____		WEEK 18	05/11-05/17	_____
	WEEK 13	04/06-04/12	_____		WEEK 19	05/18-05/21	_____
	WEEK 14	04/13-04/19	_____				

Total hours for weeks 9-18: _____

Total hours for weeks 1-8: _____

Total hours for the semester: _____

SUPERVISOR'S SIGNATURE: _____

Supervisor comments:

**This is the date 8 week students start tracking hours.

#This form will be due May 6 by noon. **Hours between May 7-May 21** may be projected with supervisor's signature. Insurance coverage for unpaid interns ends on May 21.

Make a copy of this time sheet before submitting to Work Experience Office. Credit cannot be issued if time sheet is not complete or not turned in. We may contact supervisor to verify hours noted on this sheet.

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