

Student Time and Activity Log

Student Name: _____ Semester: _____ Student ID#: _____
 Agency/Activity Site: _____ Supervisor Name: _____
 Supervisor Title: _____ Supervisor Phone/Email: _____

Time	Total Number of Hours	Activity Description	Supervisor Signature
Date: _____ From: _____ To: _____		_____ _____ _____	
Date: _____ From: _____ To: _____		_____ _____ _____	
Date: _____ From: _____ To: _____		_____ _____ _____	
Date: _____ From: _____ To: _____		_____ _____ _____	
Date: _____ From: _____ To: _____		_____ _____ _____	
Date: _____ From: _____ To: _____		_____ _____ _____	

***Students need to fill out a separate Time and Activity Log for each agency site they work at.**