End-of-Semester Time Sheet

The internship supervisor should fill this sheet out at the end of each week of the internship. At the end of the last week of classes, the intern must submit this form to the appropriate UNF Internship Coordinator.

☐ Fall ☐ Spring ☐ Summer Year: _____

Intern's Name: _____ Employer's Name: _____

Employer's Address: _____

Supervisor's Name: _____ Phone: _____

Week Ending	# of Days Worked	# of Hours Worked	Primary Duties	Signature of Supervisor
8/4/00	EXAMPLE 5	15		