

COOPERATIVE EDUCATION 120
STUDENT ACTIVITY REPORT

| | | | | | | | | |
|---------------|---|----|----|----|----|----|----|----|
| WEEK (circle) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |

STUDENT:
SCHOOL:
SUPERVISOR:
ORGANIZATION:

| FOR SCHOOL USE ONLY | |
|---|--------------------------|
| Report needs to improve in the areas indicated. Please check off the appropriate box(es) | |
| LEGIBILITY | <input type="checkbox"/> |
| GRAMMAR/SPELLING | <input type="checkbox"/> |
| PUNCTUALITY | <input type="checkbox"/> |
| OTHER | <input type="checkbox"/> |

| DATE AND HOURS | TASKS AND/OR ACTIVITIES PERFORMED |
|---------------------------------------|-----------------------------------|
| Date: From: To: Total Hours: | |
| Date: From: To: Total Hours: | |
| Date: From: To: Total Hours: | |
| Date: From: To: Total Hours: | |
| Date: From: To: Total Hours: | |

| | | | |
|-----------------------------|----------------------------------|----------------------|------------------------|
| TOTAL HOURS FROM THIS WEEK: | TOTAL HOURS FROM PREVIOUS SHEET: | TOTAL HOURS TO DATE: | DAYS ABSENT THIS WEEK: |
|-----------------------------|----------------------------------|----------------------|------------------------|

SUPERVISOR'S COMMENTS:

| | |
|----------------------|-------------------------|
| STUDENT'S SIGNATURE: | SUPERVISOR'S SIGNATURE: |
|----------------------|-------------------------|