



**CONEJO VALLEY UNIFIED SCHOOL DISTRICT
SCHOOL TO CAREER
INTERNSHIP TIMESHEET / LOG**



Students: For each day you participate in your internship, record the date, time at the site and your activities. Have your supervisor sign the completed form. Return the form your supervising teacher as directed.

Student Name _____ **Major / Academy** _____
Work Site Supervisor _____
Site of Internship _____

Day of Week / Date	Time	Activities

SUPERVISOR'S SIGNATURE _____