WKU

Time Sheet (Field Practicum)

Student Name:_____ Month:_____ Year:_____ Total Monthly Hours: _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Hours		Total Monthly Hours
Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Week One _____		**Month** **Hours** _____ _____
Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Week Two _____		_____ _____
Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Week Three _____		_____ _____ Total hours completed in field _____
Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Week Four _____		
Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Date:_____ # Hours_____ _____ To - From	Week Five _____		

SIGNATURES:

Student 800#:_____   Field Instructor:_____
 Date   Date

*By signing this form, I attest to meeting to the minimum one hour weekly supervision requirements between student & Field Instructor.