

**COOPERATIVE WORK EXPERIENCE EDUCATION
TIME CARD
SUMMER 2007**

Student's Name _____ Student's Phone _____
WE Class/Section # _____ WE Instructor _____
Student E-mail _____ Employer _____

Week of June 18th _____

Week of June 25th _____

Week of July 2nd _____

Week of July 9th _____

Week of July 16th _____

Week of July 23rd _____

Total Hours _____

Supervisor's comments and signature:

Supervisor Signature: _____

TIME CARD DUE ON JULY 30th

**...Please fill out your evaluation on the back!*