

John V. Lindsay Wildcat Charter School
1239 Lafayette Ave
Bronx, NY 10474
Phone: 212-209-6119 Fax: 212-918-0750 DO NOT FAX TIMESHEETS



**STUDENT INTERNSHIP
TIME SHEET**

PLEASE DO NOT COPY TIMESHEETS

Student Name: _____ **Week Ending:** _____

Internship Site: _____

Supervisor: _____ **Telephone Number:** _____

Address: _____

Day	Date	In	Out (Lunch)	In (Lunch)	Out	Total Hours	Comments				
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
		Total Hours Worked				=		Complete	Journal	Activity	Entered

Supervisor's Signature: _____ **Title:** _____

Student Signature: _____ **Date Completed:** _____