

Student Name:

Faculty Coordinator:

Internship/Capstone Site:

Internship/Capstone Supervisor:

# SUBMITTING YOUR LOG

At the end of your internship/capstone experience, please sign (electronically) below, then forward this log to your supervisor. Once you have your supervisor's signature, forward the log to your internship/capstone coordinator.

### **Total Hours Completed:**

I certify that the hours and activities detailed below were completed during my internship/capstone experience.

#### **Student Signature:**

I have reviewed the hours and activities outlined below and verify that they reflect the student's work during their internship/capstone experience.

#### **Supervisor Signature:**

## **UPDATING YOUR LOG**

Update this log on a weekly basis with the hours you worked and the activities and projects you worked on. Use this form to track your progress in meeting the objectives you outlined in your Internship/Capstone Agreement.

Weekly Date Range	Summary of Activities/Projects Worked On	Hours Completed

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