



Intern's Name: \_\_\_\_\_

**STUDENT LEARNING LOG**

Company/Organization: \_\_\_\_\_

On-site Supervisor: \_\_\_\_\_

Week of: \_\_\_\_\_

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Hours:							

Total Hours this Week: \_\_\_\_\_ Cumulative Hours to Date: \_\_\_\_\_

Administrative Duties:

Projects:

Reflections, Challenges, Problems:

Reviewed by: _____	Date: _____
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