



Internship Timesheet

Student Name _____ ID _____

Faculty Advisor _____

Term _____ Course _____ Credits _____

Site Name _____ Site Supervisor Name _____

Date	Time In	Time Out	Hours	Activity Log
Semester Total				

I certify that I have worked the hours indicated above.

Student Intern Signature _____ Date _____

I certify that the Student Intern has worked the hours indicated above.

Site Supervisor Signature _____ Date _____

Once this form has been completed and signed by the Student Intern and Site Supervisor, the Student Intern must upload a scan/photo of the completed form to the Chapman University Internship Portal according to the internship calendar deadline.

Date	Time In	Time Out	Hours	Activity Log
Semester Total				

I certify that I have worked the hours indicated above.

Student Intern Signature _____ Date _____

I certify that the Student Intern has worked the hours indicated above.

Site Supervisor Signature _____ Date _____

Once this form has been completed and signed by the Student Intern and Site Supervisor, the Student Intern must upload a scan/photo of the completed form to the Chapman University Internship Portal according to the internship calendar deadline.