# OFF CAMPUS STUDENT WEEKLY ACTIVITY LOG

**Student:** _____  **Placement:** _____

**Note to Student:  Write a brief description of the types of activities you worked at during the day, complete the day and times, and when this page is complete, have your supervisor sign it.  This log is to be signed and submitted to your Off Campus Coordinator on the first school day of the following week.**

| DATE: | Hours Worked: | | | Tasks/Activities Performed: |
|---|---|---|---|---|
| | From: | To: | Total: | |
| **MONDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |
| **TUESDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |
| **WEDNESDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |
| **THURSDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |
| **FRIDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |
| **SATURDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |
| **SUNDAY:** | | | | 1. _____<br>2. _____<br>3. _____ |

**Hours from Previous Log:** _____  **Total Hours This Week:** _____  **Total Hours to Date:** _____

**Supervisor's Comments:** _____

_____

_____

**Please rate the student's overall performance for this week:  Excellent:_____  Very Good:_____  Satisfactory:_____  Unsatisfactory:_____**

**Supervisor's Signature:** _____  **Student's Signature:** _____