

**Southwestern University
Academic Internship Bi-Weekly Timesheet**

Intern Full Name: _____ **Week 2 End Date:** _____

Internship Site: _____

WEEK 1	START	STOP	START	STOP	START	STOP	DAILY TOTAL
SUNDAY							
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							

TOTAL HOURS FOR WEEK 1 _____

WEEK 1	START	STOP	START	STOP	START	STOP	DAILY TOTAL
SUNDAY							
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							

I certify that these hours are true and correct.

TOTAL HOURS FOR WEEK 2 _____

Intern Signature Date

Internship Supervisor Signature Date

Please Print Internship Supervisor Name

All time sheets are due completed and signed to Career Services by **NOON** the following **Tuesday**.