



INTERNSHIP WEEKLY WORK REPORT

SECTION A: To be completed by the student-learner

Student Name: _____ Dates Reporting: From _____ To _____

Prosser Program: _____ AM / PM Student

Instructor's Printed Name: _____

Technical Honor Diploma Candidate: Y / N Total hours worked this week: _____

SECTION B: To be completed by the employer

Grading Scale: 5=Excellent / 4=Good / 3=Average / 2=Below Average / 1=Poor

1. Student's ability to be on time: 5 4 3 2 1

2. Student's attitude/work ethic: 5 4 3 2 1

3. Student's appearance: 5 4 3 2 1

4. Student's ability to work in a team: 5 4 3 2 1

5. Student's overall employee score this period: 5 4 3 2 1

Days / Dates Absent this week (0 if none): _____

Areas Needing Improvement / Positive Comments:

Supervisor's Signature: _____ Date: _____

Instructor's Signature: _____ Date: _____

This form must be completed and returned to your Prosser instructor on the Friday of the week being reported.