Wisconsin Lutheran College Office of Career & Professional Development

INTERNSHIP HOUR LOG

**This form must be completed, signed, and uploaded into the online classroom at the conclusion of the internship.

Student/Supervisor Information								
Student name:	ent name: Last First				Warrior ID:			
Student phone:			WL	C email:				
Site supervisor r	name:							
Supervisor phone:								
			Hou	r Log				
Academic credit 1 credit = 45 tot	_		edits = 90 total ii		s 3 credits	= 135 total inte	rnship hours	
Work Week	Total Hours	Student Initials	Supervisor Initials	Work Week	Total Hours	Student Initials	Supervisor Initials	
5/22-5/26	12	ABC	243	Total Cradi	to Formed.			
Total Number of	-	-			ts Earned:			
I verify the infor total completed		·	rs log has been	reviewed for a	ccuracy and is	an exact repres	entation of	
Student intern s	ignature:)ate:		
Site supervisor signature:					Date:			
Questions? Please	contact:							

Questions? Please contact: Thad Jahns, Director of Career & Professional Development 414.443.8949 | thad.jahns@wlc.edu