

UAH Cooperative Education Bi-Weekly Labor Report

(Due by 5:00 p.m. on the Wednesday following the reporting period)

Name: _____

Work Period: _____ To _____

Date:								
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total

Work Period: _____ To _____

Date:								
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total

Does this report reflect the schedule you submitted on your Address and Schedule Form?

Yes _____ No _____

If no, please explain below

I certify that the distribution of labor above represents the actual work performed during this reporting period.

Signatures

Co-op Student: _____ Date _____

Supervisor: _____ Date _____

I certify that the above student is adhering to the policies and procedures of the UAH Parallel Agreement.

Company Coordinator: _____ Date _____