Practicum: Monthly Time Sheet

Student Name: **Signature:**_____ **Date:**_____

Site Supervisor: **Signature:**_____ **Date:**_____

Month/Year: **Agency:**

Date (DD/MM/YY)	Start Time (0:00)	End Time (0:00)	Total Hours (0.00)	Description of Activities (Type bullet points specifying the activities. For example instead of writing "Attended Meeting" you would write, "Attended RED Team meeting in which I participated in assessment")	Type of Intervention used (select from drop-down)	Level of Intervention used (select from drop-down)	Client/ Population (Fill in yourself)
Total Hours			**0**				
Previous Month Hours			0				
Cumulative Hours			**0**				