



**Kawartha Pine Ridge District School Board
COOPERATIVE EDUCATION TIME SHEET
& ACTIVITY REPORT**

STUDENT: _____
EMPLOYER: _____

DATE RECEIVED IN CO-OP OFFICE: _____
CO-OP TEACHER: _____

HOURS	TASKS, ACTIVITIES - performed, assisted, observed
Monday	
Date:	
Time in:	
Time out:	
TOTAL:	
Tuesday	
Date:	
Time in:	
Time out:	
TOTAL:	
Wednesday	
Date:	
Time in:	
Time out:	
TOTAL:	
Thursday	
Date:	
Time in:	
Time out:	
TOTAL:	
Friday	
Date:	
Time in:	
Time out:	
TOTAL:	
Hours For Week:	Employer comments:
Previous Total:	
Total Hours To Date:	Employer Signature: Was adequate notification of absence(s) given?
Total Absences: _____	Student Signature:
<i>YOU MUST CALL YOUR EMPLOYER AND THE CO-OP DEPARTMENT IF YOU ARE GOING TO BE ABSENT. USE THE REVERSE SIDE FOR ADDITIONAL HOURS OR COMMENTS.</i>	