# COLLEGE OF THE SISKIYOUS
## COOPERATIVE WORK EXPERIENCE
### MONTHLY TIMESHEET

**Month:** October  
**Year:** 2016  

<table>
<thead>
<tr>
<th>Date</th>
<th># of Hrs Wkd</th>
<th>Date</th>
<th># of Hrs Wkd</th>
<th>Date</th>
<th># of Hrs Wkd</th>
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<td>10-30-2016</td>
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**Total Hours:**

I hereby certify that this time card is a true and accurate statement.

**Student’s Signature:**

The following sections are to be completed by your supervisor each month.

## PROGRESS INFORMATION

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>EXCELLENT</th>
<th>GOOD</th>
<th>SATISFACTORY</th>
<th>NEEDS IMPROVEMENT</th>
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</thead>
<tbody>
<tr>
<td>Attendance/Punctuality</td>
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<tr>
<td>Interest/Initiative</td>
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<tr>
<td>Work Quality</td>
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<tr>
<td>Appearance</td>
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<tr>
<td>Ability to take Criticism</td>
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## PROGRESS TOWARDS JOB ORIENTED OBJECTIVES

<table>
<thead>
<tr>
<th>OBJECTIVE</th>
<th>COMPLETED</th>
<th>EXCELLENT</th>
<th>GOOD</th>
<th>FAIR</th>
<th>LIMITED</th>
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<tbody>
<tr>
<td>Objective 1</td>
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<td>Objective 2</td>
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<td>Objective 3</td>
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**SUPERVISOR COMMENTS:**

**Supervisor’s Signature:**  
**Date:**

**Cooperative Work Experience Director:**  
**Date:**