

Stratford Northwestern
Secondary School
Semester 1 2016/17

Cooperative Education
Log # 6

Week # 6
Oct. 31st - Nov. 4th

Hand-in EVERY MONDAY to the Main Office or Fax 519-271-7834

Student: _____ Workplace Name: _____		
Teacher: _____ Workplace Supervisor: _____		
Date	Hours	Summary of Experiences / Specific Tasks and Activities Performed
Monday _____	From: To: Hours: _____	_____ _____ _____
Tuesday _____	From: To: Hours: _____	_____ _____ _____
Wednesday _____	From: To: Hours: _____	_____ _____ _____
Thursday _____	From: To: Hours: _____	Journal 3 Due _____ _____
Friday _____	From: To: Hours: _____	P.A. DAY

Week 6 - Total Hours _____ Time by 1/4 hour (.25 / .50 / .75) Student Signature: _____ Date: _____
Total Days Absent Work _____ Supervisor Signature: _____ Office Initials: _____ Teacher Initials: _____

Comments: _____

How many staff members are there at your placement and what are their roles?

STAFF MEMBER

TYPE OF POSITION/ROLE

R3: Log

Communication	Level 4 (80%-100%)
Expression and organization of ideas and information	<p>Expresses and organizes ideas and information with high degree of effectiveness.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Handed in to office by due date <input type="checkbox"/> Log is completely filled in (front and back page) <input type="checkbox"/> Daily tasks are described in detail <input type="checkbox"/> Log is signed by Supervisor <input type="checkbox"/> Clear of grammar and spelling mistakes <input type="checkbox"/> All hours are added up correctly