Stratford Northwestern Secondary School Semester 1 2016/17	**Cooperative Education** **Log # 1-8**	**OTHER HOURS** **Sept. 26th - Nov. 18th**

Other Hours Log is due when Log # 8 is handed in

Student: _____ **Workplace Name:**

_____

Teacher: _____ **Workplace Supervisor:** _____

Date	Hours	Summary of Experiences / Specific Tasks and Activities Performed
_____ _____	From: To: Hours:_____	_____ _____ _____ Pre-approved by: Parent/Guardian _____ Pre-approved by: Supervisor _____ Pre-approved by Teacher _____
_____ _____	From: To: Hours:_____	_____ _____ _____ Pre-approved by: Parent/Guardian _____ Pre-approved by: Supervisor _____ Pre-approved by Teacher _____
_____ _____	From: To: Hours:_____	_____ _____ _____ Pre-approved by: Parent/Guardian _____ Pre-approved by: Supervisor _____ Pre-approved by Teacher _____

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_____ _____	From: To: Hours:_____	_____ _____ _____ Pre-approved by: Parent/Guardian _____ Pre-approved by: Supervisor _____ Pre-approved by Teacher _____
_____ _____	From: To: Hours:_____	_____ _____ _____ Pre-approved by: Parent/Guardian _____ Pre-approved by: Supervisor _____ Pre-approved by Teacher _____

Other 9-16 - Total Hours_____ Time by 1/4 hour (.25 / .50 / .75) Student Signature: _____Date:_____

Total Days Absent Work _____ Supervisor Signature: _____Office Initials: _____ Teacher Initials: _____

Comments:_____

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