

Month _____ Year _____

Student Name _____

Supervisor Name _____

Service Site _____

Signature _____

Date _____

Signature _____

Date _____

| Day | Hours |
|-----|--------------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| 11 | |
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| 22 | |
| 23 | |
| 24 | |
| 25 | |
| 26 | |
| 27 | |
| 28 | |
| 29 | |
| 30 | |
| 31 | |
| 0 | Total Hours |

* Timesheets are due no later than the 10th of the following month

* Timesheets should be submitted to the Center for Urban Connections located in Tivoli 243

* Please save a copy of your timesheet for your own records

| | |
|--------------------------|-------------------|
| CUC Use Only | |
| <input type="checkbox"/> | Approved by _____ |
| | Date _____ |

Month/Year _____

Name _____

Service Site _____

Monthly Reflection

Describe the service activities you have performed this month, and some of the results you have seen.

What challenges have you experienced this month in your service, and what steps you have taken to resolve those challenges?

Please provide highlights (quotes or stories) from your service that illustrate your impact on the organization that you serve, or on the local community.

Describe what you are planning to do in the month ahead.

Approved by CUC _____
Initials

Date _____