**Queens Technical High School Work-Based Learning Experience Time Sheet**

*(Please print all information except signatures)*

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| --- | --- |
| **Student Name:** | **Supervisor/Contact Full Name:** |
| **Company Name/Organization:** | **Supervisor/Contact Email:** |
| **Supervisor/Contact Phone:** | **CTE Major:** |
| **Company/Organization Address:** | **Pay Period Dates** *(Mon-Sun)***:** |

**Time Log**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Time-In** | **Time-Out** | **Lunch** | **Hours Worked** | **Date** | **Time-In** | **Time-Out** | **Lunch** | **Hours Worked** |
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| **Total Hours Worked:** | | | |  | **Total Hours Worked:** | | | |  |

***Sign below to certify that the information and claims on this time sheet are true and correct:***

|  |  |
| --- | --- |
| **Student Signature:** | **Supervisor Signature:** |