ALLAN HANCOCK COLLEGE

Student Name: _____

Class (*circle one*): WEE 149 **or** WEE 302 **or** Other: _____

Instructor: _____

WORK EXPERIENCE EDUCATION TIMESHEET

Credits in this course will only be granted when the record of total hours worked during the semester is filed with the instructor. Course credit will be earned at the rate of 54 paid or unpaid hours of work per unit. A maximum of 3 units may be earned for General Work Experience and 4 units for Occupational Work Experience per semester.

Students, please enter total hours for each day and then each month's total hours. Add up all months for a grand total for the semester or term.

1. Month of _____

1._____	6._____	11._____	16._____	21._____	26._____	31._____
2._____	7._____	12._____	17._____	22._____	27._____	
3._____	8._____	13._____	18._____	23._____	28._____	
4._____	9._____	14._____	19._____	24._____	29._____	
5._____	10._____	15._____	20._____	25._____	30._____	

Monthly Total _____

2. Month of _____

1._____	6._____	11._____	16._____	21._____	26._____	31._____
2._____	7._____	12._____	17._____	22._____	27._____	
3._____	8._____	13._____	18._____	23._____	28._____	
4._____	9._____	14._____	19._____	24._____	29._____	
5._____	10._____	15._____	20._____	25._____	30._____	

Monthly Total _____

3. Month of _____

1._____	6._____	11._____	16._____	21._____	26._____	31._____
2._____	7._____	12._____	17._____	22._____	27._____	
3._____	8._____	13._____	18._____	23._____	28._____	
4._____	9._____	14._____	19._____	24._____	29._____	
5._____	10._____	15._____	20._____	25._____	30._____	

Monthly Total _____

4. Month of _____

1._____	6._____	11._____	16._____	21._____	26._____	31._____
2._____	7._____	12._____	17._____	22._____	27._____	
3._____	8._____	13._____	18._____	23._____	28._____	
4._____	9._____	14._____	19._____	24._____	29._____	
5._____	10._____	15._____	20._____	25._____	30._____	

Monthly Total _____

5. Month of _____

1._____	6._____	11._____	16._____	21._____	26._____	31._____
2._____	7._____	12._____	17._____	22._____	27._____	
3._____	8._____	13._____	18._____	23._____	28._____	
4._____	9._____	14._____	19._____	24._____	29._____	
5._____	10._____	15._____	20._____	25._____	30._____	

Monthly Total _____

COMMENTS: _____

_____

GRAND TOTAL
SEMESTER/TERM HOURS: _____

Verified by: _____

Employment Supervisor's Signature Title Date

_____

Student's Signature Date

_____

Instructor's Signature Date

AHC does not discriminate on the basis of race, color, religion, gender, national origin, ethnic identification, age, or disability.