



Weekly Cooperative Work Experience Record

Name:

CWE Coordinator:

Employer:

Week dating from:
(mon/day/yr)

To:

CWE credits:

Clock hours required for credits:

Total hours worked to
date:

DAY	TOTAL HOURS	JOBS PERFORMED - RELATED TASKS TO LEARNING OBJECTIVES
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

Total Weekly Hours:

Supervisors
Signature: _____

Student Impressions of Week's Work

(Confidential Student Impressions for CWE Instructors/Coordinators Only)

1. What new jobs or procedures did you learn from your work this week?
2. Describe the most interesting incident or experience you had this week at work.
3. What challenges did you face? How did you deal with them?
4. Do you need help or advice on any CWE issues?

