INTERNSHIP WEEKLY PROGRESS REPORT



DIRECTIONS: Make as many copies of this form as needed. Send, scan or **fax <u>one</u>** copy to the Internship Coordinator at the end of each work week. Sign Section 4 and have your supervisor sign Section 5.

1.	Report #	Intern Name (print)				
Naı	me of Employing Busin	ess or Organization:				
Name of Employing Dept:			Week Work Periodto			
2. Describe the functions, tasks, responsibilities , etc. of your work this past week that are relevant both to your internship program and your career objectives. Be specific, but brief. Use the other side if more space is needed. (Please type or print legibly.)						
3.	Time Log					
			Hours This Week	Total Hrs. f		
Observation				meerisiip		
	sible Work Assignmen	ts				
Conferences (Identify with whom)						
Other Activities:						
A.						
В.						
TOTAL						
4.	Intern's Signature					
5.	Supervisor's Commen	ts:				
Supervisor's Signature						
		Date:				
Ma	il to: Internship Coordi	nator	or FAX to: 608.342.1965			
Computer Science & Software Engineering Dept or SCA			or scan & E-mai	an & E-mail to stutenbm@uwplatt.edu		

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