



COOPERATIVE WORK EXPERIENCE MONTHLY CALENDAR

Student:	Month:
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Use letters to identify the following: **S** = Sick Leave **CL** = Class Room **SF** = School Function

DATE	IN	OUT	TOTAL HOURS	WORK LOCATION
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

TOTALS: Days Worked _____ Sick Days _____ Class Days _____ Schools Functions _____

I verify that the above hours to be accurate.

Supervisor:	Date:
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