Faculty to Student Communication Log



COOPERATIVE WORK EXPERIENCE EDUCATION (CWEE) PROGRAM

 FACULTY TO STUDENT COMMUNICATION LOG – To be filled out by faculty

 Semester:
 Instructor Name:

 Student Name:
 Student ID #:

 Course #:
 Section #:
 Units:

 DATE
 HOURS WORKED
 PARTICIPATION SUMMARY

 Ex. 08/19/2013
 1
 Met with student to go over training plan

 Image: Student ID #:
 Section #:
 Units:

 DATE
 HOURS WORKED
 PARTICIPATION SUMMARY

 Ex. 08/19/2013
 1
 Met with student to go over training plan

 Image: Student ID #:
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Total Hours: *Total Hours worked by faculty should not exceed 5 hours

Faculty Advisors Signature: ____

CWEE Office Use Only		
Units	Unpaid	Paid
1	60-119	75-149
2	120-179	150-224
3	180-239	225-299
4	240+	300+
Total number of hours completed by student:	Verified by:	