Minimum Total Contact Hours Undergraduate = 150 / Graduate = 200

DAILY LOG TIME SHEET CONTACT HOURS

Student Name	Katharine Schmidt
Beginning Date	June 8, 2015
Organization	Mason Athletic Department
Supervisor's Name	Scott Stemple
Supervisor E-Mail	stemples@masonohioschools.com

MONTH: JUNE **TOTAL HRS [62**] Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1		-	-	-	-	-	-	-
WK 2	-	5	6	6.5	5.5	6	-	29
WK 3	-	3.5	5.5	-	-	-	-	9
WK 4	-	5	5	-	-	-	-	10
WK 5	-	7	7					14

MONTH: JULY **TOTAL HRS [83.5**] Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1				7	7	7	-	21
WK 2	-	7	6.5	7	5	-	-	25.5
WK 3	-	-	-	-	4	5	-	9
WK 4	-	6	5.5	-	-	4.5	-	16
WK 5	-	-	-	6	-	6		12

MONTH: AUGUST **TOTAL HRS [55.5**] Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1							-	
WK 2	-	5	7.5	5.5	9	2	-	29
WK 3	-	7.5	6	6	5	2		26.5
WK 4								
WK 5								

MONTH: **TOTAL HRS [**] Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1								
WK 2								
WK 3								
WK 4								
WK 5								

Minimum Total Contact Hours Undergraduate = 150 / Graduate = 200

MONTH: **TOTAL HRS [ ]** Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1								
WK 2								
WK 3								
WK 4								
WK 5								

MONTH: **TOTAL HRS [ ]** Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1								
WK 2								
WK 3								
WK 4								
WK 5								

MONTH: **TOTAL HRS [ ]** Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1								
WK 2								
WK 3								
WK 4								
WK 5								

MONTH: **TOTAL HRS [ ]** Indicate the number of hours per day/per square

	SUN	MON	TUE	WED	THR	FRI	SAT	TOTALS
WK 1								
WK 2								
WK 3								
WK 4								
WK 5								