



POLK STATE COLLEGE

Internship Attendance and Experience Log

Intern:	Date:
Internship Placement:	Program:
Placement Supervisor:	Faculty:

Week of: (dd/mm/yy – dd/mm/yy)	Hours (total hours for week)	Cumulative Hours (total hours to date)	Supervisor's Signature (initials weekly/full signature for total)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
Semester Total:			

Experience Log (should coincide with your Internship Learning Plan):

Week of: (dd/mm/yy – dd/mm/yy)	Skill Sets or Competencies Developed (technical aspects)	Learning Reflections
EXAMPLE ENTRY: 10/15/15- 10/19/15	EXAMPLE: Completed training on SmartTurn software for Purchasing and Inventory (P&I) management	E.g.: Learned to use the software that helps maintain control over purchases, inventory, supplies, and equipment and control loss prevention. Interesting to see how they are often combined functions.
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

*Add rows to sections as needed. When complete, submit to your Program Director if completing a “for credit” internship as part of your curriculum. Maintain a copy for your records.

Polk State College is committed to equal access/equal opportunity in its programs, activities, and employment. For additional information, visit polk.edu/equity.

Concerns regarding access to experiential opportunities at the internship site should be brought to the attention of the Coordinator of Disability Services, the Director of Equity and Diversity, and the Internship Coordinator.

I attest that these hours are correct and that I have accurately documented my time and experience for this internship placement.

Student’s Signature

Date Submitted: