



INTERNSHIP LOG BOOK

Student's Name:		Internship Site:	
Supervisor's Name:		Week beginning:	
Internship Coordinator/Advisor:			

Please document in detail the activities in which you participated, specific incidents you observed daily to enable you in answering the attached questions.

Day and Date:	Description of Activity
Day 1:	
Day 2:	
Day 3:	
Day 4:	
Day 5:	
Day 6:	
Day 7:	
Day 8:	
Day 9:	
Day 10:	

(Add additional row as needed.)

1.	What new knowledge or skill did you learn on the internship this week? Describe.
2.	What have you learned in college that you applied on the internship?
3.	List any difficulties, mistakes, pleasant or unpleasant experiences that occurred this week. What did you do to correct your mistake (s)?
4.	On what skill or question could you use help in performing your internship responsibilities better?
5.	What interesting or challenging experience did you have with your fellow workers or site supervisor? Describe.

Intern Signature:		October 7, 2021
	Signature Over Printed Name of Student	October 7, 2021
		Date: