

Internship Weekly Progress Report

*Submit this completed form every week via the internship class drop box in Brightspace. Your final internship grade will be lowered if this report is not submitted each week.*

Student Intern:

Internship organization:

Check days worked: Sun Mon Tue Wed Thur Fri Sat

Week ending date:      

Hours worked this week:

Cumulative hours completed:

Hours remaining:

Describe what you did at the internship this week:

Evaluate how well you completed these tasks. Note any challenges you faced and how you handled them.

What was the highlight or major achievement of the week for you on this internship?

What do you need to do in order to improve your skills?

What are your next tasks for this internship?      

Signed: Signed:

(Student Intern) Date:       (Professional Supervisor) Date