**EDU 101 Timesheet**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Student R Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Date** | **Start Time** | **End Time** | **Daily Total** | **Semester Total** | **Teacher Initials** |
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By signing below you verify that all hours are true and accurate.   
***Please Note: All signatures and initials must be handwritten. Typed signatures will not be accepted.***

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Student Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Mentoring Teacher Signature Date