

TEXAS TECH UNIVERSITY
 DEPARTMENT OF PLANT AND SOIL SCIENCE
MONTHLY INTERN ACTIVITY REPORT

Report by for the period of 20

to 20 Firm or Employer Name

Employer's Address

Employer's Phone

WORK EXPERIENCE

Approximate Number of
Hours on Each Job per
Reporting Period

BREAKDOWN OF JOBS PERFORMED (BE SPECIFIC)

| | |
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| Skills learned: | Proficiency | | |
|----------------------|----------------------|----------------------|----------------------|
| | Some | Average | High |
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Time absent from duty: Days Hours

Reason for absence(s)

Number of personal conferences with Manager and Intern

Subject:

At the end of each month, complete one form and mail to your TTU advisor.

Submitted by: _____ Verified by: _____

Student Intern
Employer

Date Received: _____ Received by: _____