**AppalachiaCorps Students:**  Please fill out the table below, reflecting your internship hours for the week.  After filling out the required information, forward the table in an email to Amanda Royer ([Amanda.Royer@uky.edu](mailto:Amanda.Royer@uky.edu)), Todd Stoltzfus ([Todd.Stoltzfus@uky.edu](mailto:Todd.Stoltzfus@uky.edu)), Kathryn Engle ([ksen223@g.uky.edu](mailto:ksen223@g.uky.edu)), and your internship supervisor for approval.

**Internship Supervisor:**  After reviewing the submitted hours below, please “reply all” to your emailed timesheet (including your student, Todd, Amanda, and Kathryn) and indicate if you approve these hours.  “I approve” is sufficient.

Be sure to also submit your hours online via MyUk.

|  |  |  |  |
| --- | --- | --- | --- |
| **Pay Period**  **Start Date:** |  | **Pay Period**  **End Date:** |  |
| **Organization Name:** |  | **Supervisor Name:** |  |
| **Day of the Week** | **Hours Worked** | **Duties and Responsibilities** | |
| **Sunday** |  |  | |
| **Monday** |  |  | |
| **Tuesday** |  |  | |
| **Wednesday** |  |  | |
| **Thursday** |  |  | |
| **Friday** |  |  | |
| **Saturday** |  |  | |
| **Total Hours Worked** | |  | |