



# California Mini-Corps Verification of Hours Worked

MINI-CORPS STUDENT ASSISTANT: \_\_\_\_\_

\_\_\_\_\_  
(Supervising Teacher Signature)

MONTH: \_\_\_\_\_

YEAR: \_\_\_\_\_

PRIOR MONTH				FOR SUPERVISING TEACHER:				
DAY	TIME IN	TIME OUT	TOTAL	The Mini-Corps Student was:				
26				_____ Punctual				
27				_____ Late a few times				
28				_____ Late on a regular basis				
29				<b>The Mini-Corps Student was:</b>				
30				_____ Never Absent				
31				_____ Absent Once				
<b>CURRENT MONTH</b>				Absent _____ (please specify number of times)				
1				<b>The Mini-Corps Student:</b>				
2				_____ Worked his/her regular schedule				
3				_____ Left early once or twice				
4				_____ Left early on a regular basis				
5								
6								
7								
8								
9				<b>Student Work Schedule:</b>				
10				<b>TIME IN</b>	<b>TIME OUT</b>	<b>ROOM</b>	<b>TEACHER</b>	<b>GRADE</b>
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								

\_\_\_\_\_  
**(To be completed once unless work schedule changes)**

Tutor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SUBMIT THIS FORM WITH YOUR PROGRAM SPREADSHEET**