

BAYLOR UNIVERSITY HHPR RESEARCH ASSISTANT WEEKLY LOG FORM (5 Hours Required)

hr	Date	Hours	Assignment	Location	Report of Research Experience	SI
Mon						
Tues						
Wed						
Thurs						
Fri						
Sat						
Sun						
hr	Date	Hours	Assignment	Location	Report of Research Experience	SI
Mon						
Tues						
Wed						
Thurs						
Fri						
Sat						
Sun						

- _____

Research Experience Supervisor's Signature _____
Date
- _____

Research Experience Supervisor's Signature _____
Date

I certify that the hours recorded on this form have been verified and entered into the student's research record log.

Dr. Mike Greenwood HHPR Research Coordinator _____
Date