

**NEW HOPE PROJECT, INC.  
PARTICIPANT  
WEEKLY TIME SHEETS**

NAME \_\_\_\_\_ NHP No. \_\_\_\_\_

WORK SITE \_\_\_\_\_ JOB TITLE \_\_\_\_\_

DUE MONDAY BEFORE 10:00	MORNING		AFTERNOON		TOTAL		
	START TIME	LUNCH OUT	LUNCH IN	END OF SHIFT	REGULAR WORK HRS	SCHOOL HRS	
WEEK ENDING ____/____/____							
SUNDAY ____/____/____							
MONDAY ____/____/____							
TUESDAY ____/____/____							
WEDNESDAY ____/____/____							
THURSDAY ____/____/____							
FRIDAY ____/____/____							
SATURDAY ____/____/____							
WEEKLY TOTALS							
					REGULAR	SCHOOL	TOTAL HOURS

**PARTICIPANT PROGRESS**

Please check one of the following:

Attendance/Punctuality

EXCELLENT    GOOD    FAIR    POOR

Quality/Quantity of work

EXCELLENT    GOOD    FAIR    POOR

Cooperates w/ supervisor/co-workers

EXCELLENT    GOOD    FAIR    POOR

Listens/follows directions/rules

EXCELLENT    GOOD    FAIR    POOR

Is a meeting needed to discuss progress?

YES \_\_\_\_\_ NO \_\_\_\_\_

EMPLOYEE SIGNATURE \_\_\_\_\_

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

SUPERVISOR SIGNATURE \_\_\_\_\_

MANAGER SIGNATURE \_\_\_\_\_