



Student Work Time Record

GRASP

NYSED EPE Distance Education

Program Name:

Student Name:

Teacher's Name:

FOR TWO WEEK PERIOD FROM _____ TO _____

You must complete this section for each packet that you spend time working on:

1. **Name of workbooks/worksheets/website titles that you worked on:**

2. **List the dates and amount of time you worked on this assignment (add more dates if you need to):**

Date **Amount of time worked (approximate number of hours)**



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_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

3. **Total time worked:** _____

4. **Date Assignment completed:** _____

Please give me feedback on this assignment, we appreciate your comments:

Reminder, you have agreed to work on these assignments approximately 6 hours each week.