

**2017 PORTLAND OPEN STUDIOS  
INTERN STATEMENT OF HOURS WORKED**

Directions to the Intern: Please track the hours worked at your internship site each week.  
**SIGN AND DATE THIS FORM** in the space indicated below to verify the hours listed.

Date(s)	Hours
<b>Total hours</b> served for this internship (Add all the hours you've indicated)	_____ Total hours

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Artist Mentor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Teacher Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please remember to have your mentor sign the form. Return this form to your art instructor for consideration of extra credit.