

YOUR HENDRIX ODYSSEY

Hours Log

You must attach this sheet to the Project Completion Form to receive credit.

Hendrix ID# _____

First Name: _____ Last Name: _____

Hendrix Supervisor (print name) _____

On-Site Supervisor (print name) _____

If no on-site supervisor is available, log your hours and show this form to your Hendrix supervisor for approval.

Odyssey Category (choose one)

- | | |
|--|--|
| <input type="checkbox"/> Professional & Leadership Development (100 hours minimum) | <input type="checkbox"/> Service to the World (30 hours minimum) |
| | <input type="checkbox"/> Special Projects (30 hours minimum) |

Hours Log: (Continued on reverse)

Date	Activities	Hours	On-Site Supervisor Signature

Date	Activities	Hours	On-Site Supervisor Signature
	Total Hours		

Student Signature: _____ Date: _____

Hendrix Supervisor for Student Proposals:

Signature: _____ Print Name: _____