

IMPERIAL VALLEY COLLEGE
AHP 074-Medical Assistant Administrative Externship
TIME SHEET

Student Name _____

Externship Site Name & Address:

Name of Evaluator/Mentor _____

Note to evaluator, student must perform 108 hours. Please record the dates, total hours served, initial and fax to IVC Nursing Office at 760-355-6346. If you have any questions, please contact the instructor at 760-587-0768 or the Nursing Office 760-355-6468.

Week 1 Dates _____ Total hours _____ Initials _____

Week 2 Dates _____ Total hours _____ Initials _____

Week 3 Dates _____ Total hours _____ Initials _____

Week 4 Dates _____ Total hours _____ Initials _____

Week 5 Dates _____ Total hours _____ Initials _____

Week 6 Dates _____ Total hours _____ Initials _____

Week 7 Dates _____ Total hours _____ Initials _____

Week 8 Dates _____ Total hours _____ Initials _____

Week 9 Dates _____ Total hours _____ Initials _____

Total hours 108 Initials _____