

**Internship Weekly Status Report**



 July 2024





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|  INTERN NAME: |  |
|  PROGRAM OR DIVISION:  |  |
|  REPORTING PERIOD: |  |

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|  **DAILY ACTIVITIES COMPLETED THIS WEEK + OUTPUTS** |
|  MONDAY | * Activity 1:
* Output 1:

 * Activity 2:
* Output 2:

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|  TUESDAY | * Activity 1:
* Output 1:

 * Activity 2:
* Output 2:

  |
|  WEDNESDAY | * Activity 1:
* Output 1:

 * Activity 2:
* Output 2:

  |
| THURSDAY |   * Activity 1:
* Output 1:

 * Activity 2:
* Output 2:
 |
|  FRIDAY | * Activity 1:
* Output 1:

 * Activity 2:
* Output 2:
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| **ACTIVITIES TO BE STARTED/COMPLETED NEXT WEEK (IF AVAILABLE)** |
| * Activity 1:
* Activity 2:
* Activity 3:
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| **ISSUES FOR IMMEDIATE ATTENTION/REVISION/APPROVAL** |
| * **N/A**
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