



DAMBUZA COMMUNITY DEVELOPMENT TRUST

DAMCOM TIMESHEET 2024-2025

Learner Name:	Contact no:	Company Name:
Mentor Name:	Contact no:	

Year:		Time in	Time out	Activities (5-day Week)	Learner sign:	Competency level 1 – 5 (1 = poor & 5 = excellent)	General Comments: Mentor & signature
Month:	Date (Week 1)				Comments: Leaner		
							Sign:
(Week 2)							
							Sign:



# DAMCOM TIMESHEET 2024-2025

Year:

Month:		Time in	Time out	Activities (5-day Week)	Learner sign:	Competency level	General Comments: Mentor & signature
Date (Week 3)	Day				Comments: Learner	1 – 5 (1 = poor & 5 = excellent)	
							Sign:
(Week 4)							
							Sign:
(Week 5)							
							Sign: