



COOK COUNTY ASSESSOR'S OFFICE
FRITZ KAEGI, ASSESSOR
ETHICS • FAIRNESS • TRANSPARENCY

Intern Sign-In Sheet

This sheet shall be filled out each day during a pay period and reviewed/approved by the intern's supervisor by the end of each pay period.

Name: _____ Dept.: _____ Title: Student Intern

Date	Signature of Intern at Beginning of Work Day	Start Time	Stop Time	Total	Signature of Intern at End Work Day

I have examined and approved this record and certify that the service was rendered the individual named and under my supervision.

Signature of Intern Supervisor

Date