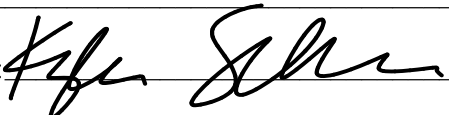


TECHNOLOGY STUDENT ASSOCIATION PLAN OF WORK LOG

Date	Task	Time involved	Team member responsible (student initials)	Comments
1.				
2.				
3.				
4.				
5.				
6.				

Advisor Name: _____ Student Initials: _____

Advisor Signature:  _____