

CHRISTMAS BREAK 2019 PAY CONFIRMATION FORM

This form should be submitted after all workdays have been completed.

Student Nai	udent Name									
Company N	ompany Name				Supervisor	Phone #				
by p date	he caler lacing a . Paym	n 'X' on ent for pa	the corre artial day	ect day. /s will be	ted line, indicate which of you only work a half day prorated. On days that	ay, please w you do not w	rite '½' o vork, leav	n the cor /e the bo	respond x <i>blank</i> .	ing
	two half		nendar ti	o trie rigi	ras an exampie. In the	X X			Fri	
. Vou	r timooh	oot in du	o on/or h	ooforo le	nuary 8 (either email to	Dec 21 X Dec 28	X Dec 22 E	xample Dec 30	Dec 24	Dec 25 Jan
• CWS	SP will ir		artner co	mpanies	at a rate of \$110/day at					
Mon	Tue	Wed	N: Pleas Thu	e complet Fri	the calendar below accord NOTE: Students are				is form i	s
Dec 23	Dec 24	Dec 25	Dec 26	Dec 27	signed and returned to the CWSP office no later than 8:00am on Monday, January 8 or they can be emailed too. Checks will be distributed to students at school once ALL forms are received. No student payment will be made until the signed confirmation form is received.					
Dec 30	Dec 31	Jan 1	Jan 2	Jan 3						
Jan 6	Jan 7				Total # of days worked	d during Chri	istmas V	acation_		
Student Si	gnature				· 	-				
Date										
Superviso Date	r Signat	ure								