AMA International University BAHRAIN Salmabad, Kingdom of Bahrain	Doc. No.	QR-PLO-004
	Issue No.	01
	Revision No.	00
College/Department:	Date of Effectivity	01 September 2011
DAILY TIME RECORD AND WORK ACCOMPLISHMENT REPORT		Page 1 of 1

Time Schedule			Number of training hours rendered	
	In	Out		

Student Name			
Student ID		Program	
Company Name			
Company Address			
Department/Unit where Trainee is assigned			

1. Provide a detailed description of work done	
2. Problem(s) encountered (if any)	
3. Solution(s) offered or implemented (if any)	
4. Provide insights gained from experience today	

Accomplished by:	Noted by:
_____ Student Signature over Printed Name / Date	_____ Training Supervisor Signature over Printed Name / Date

Training Supervisor Remarks/Feedback (if any)	