



**University of Sri Jayewardenepura**  
**External Degrees and Extension Courses Unit**

**My Number** } EEX /10

**Your Number** }

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**Work Based Training - Year 3**  
**Bachelor of Humanities and Social Sciences (General)**  
**External Degree (2020/2021)**

**Summary of the work performed for the week**

**Name of the Trainee/ Apprentice: .....Index No. ....**

**Week - From ..... To.....**

Day	Date	Description of the work done	Hours completed
1			
2			
3			
4			

5			
6			
7			

Total hours worked for this week:.....

The Institution/ Firm/ Self-employed – (If self-employed/ entrepreneur or community work, please mention)

.....

Name of Internship Mentor/ Officer in Charge/ *Grama Niladhari*:

.....

Signature of Internship mentor/ Officer in Charge/ *Grama Niladhari*\* :

.....

Stamp - .....

\*All the work done should finally be certified by the Divisional Secretary of the Division