

[EFFECTIVE FROM MAR 2026]

INTERNSHIP ATTENDANCE SHEET (*please complete cells marked in Green*)

Name of Student:	Stephanie Catherine Greatbatch				
Admission No. :	P2424358	Course:	DIT	Year of Study :	3rd
Name of Company:	CSS Office Solutions Pte. Ltd.			On PWE (returning to SP on Fri):	No
Month:	APR	Year :	2026	Work Week:	5 Day
Internship From:	30/3/2026	To	29/1/2027	Lunch Break:	1 Hour

Date	Day	Start Time	End Time	No. of Hours	Remarks	Additional Remarks
01/04/2026	Wed	9:00	18:00	8.00		
02/04/2026	Thu	9:00	18:00	8.00		
03/04/2026	Fri			0.00	Public Holiday	
04/04/2026	Sat			0.00	Company Off (Full Day)	
05/04/2026	Sun			0.00	Company Off (Full Day)	
06/04/2026	Mon	9:00	18:00	8.00		
07/04/2026	Tue	9:00	18:00	8.00		
08/04/2026	Wed	9:00	18:00	8.00		
09/04/2026	Thu	9:00	18:00	8.00		
10/04/2026	Fri	09:00	18:00	8.00		
11/04/2026	Sat			0.00	Company Off (Full Day)	
12/04/2026	Sun			0.00	Company Off (Full Day)	
13/04/2026	Mon	9:00	18:00	8.00		
14/04/2026	Tue	9:00	18:00	8.00		
15/04/2026	Wed	9:00	18:00	8.00		
16/04/2026	Thu	9:00	18:00	8.00		
17/04/2026	Fri	9:00	18:00	8.00		
18/04/2026	Sat			0.00	Company Off (Full Day)	
19/04/2026	Sun			0.00	Company Off (Full Day)	
20/04/2026	Mon	9:00	18:00	8.00		
21/04/2026	Tue	9:00	18:00	8.00		
22/04/2026	Wed	9:00	18:00	8.00		
23/04/2026	Thu	9:00	18:00	8.00		
24/04/2026	Fri	9:00	18:00	8.00		
25/04/2026	Sat			0.00	Company Off (Full Day)	
26/04/2026	Sun			0.00	Company Off (Full Day)	
27/04/2026	Mon	9:00	18:00	8.00		
28/04/2026	Tue	9:00	18:00	8.00		
29/04/2026	Wed	9:00	18:00	8.00		
30/04/2026	Thu	9:00	18:00	8.00		
				0.00		

Attendance Rate

Total No. of Days Worked (excl. P.H.):	21.0	No. of Days Attending Approved Workshops:	0.0
Attendance for Month APR-2026	21.0	(Attendance = Total No. of Days Worked + No. of Days Attending Approved Workshops)	

I, Stephanie Catherine Greatbatch, hereby declare and certify that the attendance table filled above is true and accurate.



 Signature of Student _____ X

Date: 30/4/2026
 Digital Signature Stamp

Verified By:

Signature of Company Supervisor

Name of Supervisor: Shine Soh

Dept/Designation: Software

Date: 30/4/2026

X

Digital Signature Stamp