



Peach State LSAMP - University of Georgia
 210 Holmes/Hunter Academic Building
 Athens, GA 30602
 Phone: (706) 542-0058 Fax: (706) 583-0049



Work Verification Form Fall 2022

This certifies that _____ has successfully fulfilled his/her 10 hours per week obligation in my research lab.

August 29– September 2	_____
	(Supervisor's Signature)
September 5 – September 9	_____
	(Supervisor's Signature)
September 12 – September 16	_____
	(Supervisor's Signature)
September 19 – September 23	_____
	(Supervisor's Signature)
September 26 – September 30	_____
	(Supervisor's Signature)
October 3 – October 7	_____
	(Supervisor's Signature)
October 10 – October 14	_____
	(Supervisor's Signature)
October 17– October 21	_____
	(Supervisor's Signature)
October 24 – October 28	_____
	(Supervisor's Signature)
October 31 – November 4	_____
	(Supervisor's Signature)
November 7 – November 11	_____
	(Supervisor's Signature)
November 14 – November 18	_____
	(Supervisor's Signature)
November 21 – November 25	_____
	(Supervisor's Signature)
November 28 – December 2	_____
	(Supervisor's Signature)

 (Supervisor's Name – Printed)

 (Department)

form must be received in the UGA – LSAMP Office, by December 7th, 2022 by 5:00pm to ensure timely payment. Please note that your project work time is determined by your Faculty Mentor which may or may not include all the weeks listed above