



# VALLEY VIEW UNIVERSITY WEEKLY TASK/ASSIGNMENT FORM - A1

### Important information

*\*This form must be completed by all \*\*Non-Teaching Senior Level Staff and authorized by a supervisor (Principal Officer).*

***\*This form can be completed electronically (if possible) and email to supervisor for approval.***

*\*\*All directors and deputy directors, including, works and physical plants, transportation, finance/auditing, ventures, senior assistant registrars (SAR), information technology service (ITS), chaplaincy, counseling, hall deans, and all employees who report directly to a principal officer.*

Employee Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Department: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

### **Work In Progress (WIP)**

*Describe project(s) you are working on. If it is carry-over from last week, complete Part 1; if not, go straight to Part 2. Note that all Weekly Projects must be completed within the week it was assigned. You will need a re-authorization from your immediate supervisor to carry-over jobs that were not completed.*

### **Part 1: Carry-Over Project(s)**

Describe carry-over Project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Started Date \_\_\_\_\_ Anticipated Completion Date \_\_\_\_\_ Hours Spent So Far \_\_\_\_\_

Please indicate the completion rate:     New         25%         50%         75%

Job Re-authorization: \_\_\_\_\_

Supervisor's Name

Signature

Date

### **Part 2: New Project(s)**

### **Projections**

Describe assigned project: \_\_\_\_\_  
\_\_\_\_\_

### **Estimated tasks to be completed on:**

Day 1: \_\_\_\_\_

Day 2: \_\_\_\_\_

Day 3: \_\_\_\_\_

Day 4: \_\_\_\_\_

Day 5: \_\_\_\_\_

