SCHOOL OF HOSPITALITY AND TOURISM MANAGEMENT

UNIVERSITY OF TECHNOLOGY, JAMAICA

Department Head Weekly Meeting Log

Student's Name:..... ID #.....

Name of Property:..... Group:.....

Name of Department Head:..... Week Ending:.....

Name of Department: .....

General Overview of the week's work schedule, activities completed and achievements.

Department Head' Signature

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Date:.....

Student's Signature

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Date:.....