



Kingdom of Saudi Arabia  
Ministry of Education  
AL-Imam Mohammad Ibn Saud Islamic University  
College of Computer and Information Sciences



المملكة العربية السعودية  
وزارة التعليم  
جامعة الإمام محمد بن سعود الإسلامية  
كلية علوم الحاسب والمعلومات

## Weekly Trainee Report

Week number: .....  
Trainee Name: .....  
ID number: .....  
Training Period: From:..... To.....

	Describe What covered during the training	Date dd/mm/yyyy	Comments
Activities & Tasks			
Meetings			
knowledge and Skills gained			
References (Books ,Web sites or any other sources)			
Challenges and Difficulties			

Trainee must Submit this report to the supervisor on a weekly basis via e-mail