ON-HIRED EMPLOYEE TIME SHEET



Week Ending: / /	Workforce Extensions Tamwort (T) (02) 6762 6155 tamworthreception@workext.com.a
Employee Name:	Department:
Client Name:	Supervisor:

DAY	DATE	START	FINISH	MEAL BREAKS	TOTAL HOURS	This section for office use only			
						1.0	1.5	2.0	Allowance
MON									
TUES									
WED									
THURS									
FRI									
SAT									
SUN									
Employee's Signature:			TOTAL WEEKLY HOURS						
Supervisor's Signature:									

The above signature signifies acceptance of the total hours and the terms and conditions of Workforce Extensions

W.H. & S. (This must be completed for Payroll to be processed)

3/ Were you involved in or witness any incident, accident or near miss? Y/N

Comments:

IMPORTANT NOTE: Office copy of time sheet must be received by noon on Monday. Time Sheets will be paid at the agreed rate into your bank account on Thursday

Conditions include: Rehire of an employee within 90 days must be through Workforce Extensions. Converting to Permanent incurs a Fee.