## ON-HIRED EMPLOYEE TIME SHEET

Workforce Extensions
Workforce Extensions | Melbourne CBD
(T) 0434 546 395 melbournecbd@workext.com.au

Week Ending: / /

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*

**Comments:**

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

1/ Did you undertake an induction when you first started work on this site? ..... **Y / N**
2/ Did you wear the required Personal Protective Equipment? ..... **Y / N**
3/ Were you involved in or witness any incident, accident or near miss? ..... **Y / N**

**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.



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