## **ON-HIRED EMPLOYEE TIME SHEET**



AA/a al. E. alt.	,	/	WOLKIOICE EXTERISIONS   INI	elbourne CBD
Week Ending:	/	/	(m)	
0	•	•	(T) 1800 965 992 melbournecbd@v	workext.com.au

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:

Week Ending:

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

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.

FRM - 106 - Timesheet (Weekly Format) V3 | 08/12/2022

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Workforce Extensions
Workforce Extensions | Melbourne CBD

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Comments:

Supervisor's Signature:

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

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