

Employee Time Sheet

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 Natwide Personnel Pty. Ltd. ACN 123405836



To Be Completed, Signed Daily And Returned to Natwide Personnel By Tuesday Each Week for Payment

Employee _____ Host company _____

Name _____ Company _____

Address _____ Address _____

_____ Post code _____ Post code _____

Employment Type _____ Induction Training Yes No

Employee _____

Day	Date	Start Time	Finish Time	Truck Number	Break	Comments, OHS Truck Mant	Host Representative	Normal Time	Overtime		
									1½	Double	Other
Wednesday					Y/N		Host Signature				
Thursday					Y/N						
Friday					Y/N						
Saturday					Y/N						
Sunday					Y/N						
Monday					Y/N						
Tuesday					Y/N						

Employee's Signature

I have worked the above hours and there were no injuries sustained

Host Representative Signature

Confirmation of Total Hours for Payment

Please Note: It is your responsibility to contact Natwide Personnel, before your start time if there is any reason you are unable to attend work or if you are running late

Original Copy - Natwide

Pink Copy - Employee

Yellow Copy - Client