

HRM TIMESHEET

Phone: 07 5430 7750



Employee Name:

Reporting To: Client Company Name:

Week Ending Date: (Sunday) / /

Day	Date	Time Start am/pm	Less Break	Time Finish am/pm	Ordinary Hours Worked	Time & Half	Double Time	Allowances/ details	Job Cost Centre No. (If applicable)
Mon									
Tues									
Wed									
Thurs									
Fri									
Sat									
Sun									
TOTAL EACH COLUMN									

FOUR HOUR MINIMUM PER EMPLOYEE PER DAY APPLIES

Were there any Workplace Health and Safety Issues? YES/NO
Have you completed an Incident Notification Form? YES/NO

<p><u>Supervisor to Complete</u></p> <p>Please rate employee's work performance below:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Excellent</td> <td style="width: 20%;"></td> </tr> <tr> <td>Very Good</td> <td></td> </tr> <tr> <td>Good</td> <td></td> </tr> <tr> <td>Poor</td> <td></td> </tr> <tr> <td>Please call to discuss</td> <td></td> </tr> </table> <p>Additional Comments:</p>	Excellent		Very Good		Good		Poor		Please call to discuss		<p>Timesheets are legal documents. It is your responsibility to ensure that it is accurate and signed by both you and your supervisor.</p> <p><i>I verify that the above hours are true and correct, and I confirm that I have not sustained a work related, hazard/incident/injury or change of job description.</i></p> <p>Employee's Signature:</p> <p><i>I verify that the hours stated on this timesheet are correct and that the assignment was performed to my satisfaction.</i></p> <p>Client/Supervisor Signature:</p> <p>Purchase Order No:</p>
Excellent											
Very Good											
Good											
Poor											
Please call to discuss											

Please email your timesheet to accounts@hrmcc.com.au by close of business Fridays.

Timesheet available online at www.hrmcc.com.au *Pay day is Wednesday*

I, (your name) _____ would like to notify HRM of the following change to my bank account details. Would you please ensure that my pay is deposited into the account below from this date onwards.

Address: Phone:

Bank: BSB: Account:

Signature: _____