CANDIDATE NAME:_____   WEEK ENDING (SUNDAY): _____

HOST EMPLOYER:_____   SITE ADDRESS: _____

DAY	DATE	START TIME (7:00am)	BREAK (E.g. 30 mins)	FINISH TIME (3:30pm)	TOTAL HOURS WORKED
MONDAY			Y / N		
TUESDAY			Y / N		
WEDNESDAY			Y / N		
THURSDAY			Y / N		
FRIDAY			Y / N		
SATURDAY			Y / N		
SUNDAY			Y / N		

SUPERVISOR AUTHORISATION – I confirm that I am authorised to approve the above hours. I acknowledge the TOTAL HOURS paid to the candidate will be charged at the agreed rates stated in Melrec/QueRec's Terms & Conditions of Business.

Print Name	Position
Signature	Date

EMPLOYEE AUTHORISATION – I hereby certify the hours stated are true and correct. I understand the consequences of providing false information. I also confirm no injury, near-miss or accident occurred to me whilst working for the Host Employer.

Signature	
Date	

Important Notes regarding your timesheet

One timesheet is to be filled out per Host Employer and **_MUST_** be signed by a supervisor. **_UNSIGNED TIMESHEETS_** will not be accepted by our payroll and **_WILL NOT BE PROCESSED TO BE PAID._**

If the break field is left blank a 30 min break will be deducted, if you do not have a break this must be recorded on your timesheet.

OFFICE USE ONLY

Total Ordinary Hours		Overtime 1	
Overtime 2		**TOTAL HOURS PAID**	