

Scotland Timesheet

Please use black pen and capital letters.

Name of Worker _____

Job Title _____

Name of Organisation* _____

Organisation's Address _____

Name of Supervisor* _____

DAY	DATE	START TIME	FINISHING TIME	LUNCH BREAK	SLEEP IN	TOTAL HOURS	EMPLOYER'S SIGNATURE & Date *
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							

Total hours worked for this week _____

**We certify that the hours worked are correct and we expect to be charged for the above mentioned hours at agreed rates.*

Employee: _____

Signature: _____

By signing this timesheet you are bound by Axis recruitment Ltd terms of Business