



# ON-HIRED EMPLOYEE TIME SHEET

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.

Week Ending Date: / /200\_

Employee Name:

Department:

Company Name:

Supervisor:

DAY	DATE	START	FINISH	MEAL BREAKS	TOTAL HRS	THIS SECTION FOR OFFICE USE ONLY			
						1.0	1.5	2.0	ALLOWANCE
SAT									
SUN									
MON									
TUES									
WED									
THUR									
FRI									
Employee's Signature:					<b>TOTAL</b>				
Supervisor's Signature:					WEEKLY HOURS				

The above signature signifies acceptance of the total hours and the terms and conditions of Workforce Extensions.

Comments:

### O 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 did you witness any incident, accident or near miss ?.... Y / N

### Availability (Tick the boxes for the days you are available next week)

SA	SU	M	TU	W	TH	F	ALL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conditions include: Rehire of an employee within 90 days must be through Workforce Extensions. Converting to Permanent incurs a Fee.

White-Workforce Extensions, Blue- On Hired Employee, Yellow- Host/Client

**Workforce Extensions Traralgon Office**  
69 Argyle Street, Traralgon VIC 3844  
T (03) 5176 1888 F (03) 5176 2777



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