



1300 083 599

Employee Name: _____ Week ending: _____
 Postion: _____ Client Name: _____
 Supervisor Name: _____ Site location: _____

Timesheet Number: _____

Safety Check List : Please tick each box to confirm your site safety induction and sign below		
<input type="checkbox"/> I have been Inducted at this site	<input type="checkbox"/> I have signed relevant site SWMS	<input type="checkbox"/> I understand site emergency procedures
<input type="checkbox"/> I have completed Pre-starts	<input type="checkbox"/> I understand my role on site	<input type="checkbox"/> I know where First Aid is located on site
<input type="checkbox"/> I know where the muster point is	Employee Signature	

Please state if lunches have been taken. If your lunch break is not marked clearly 1/2hr will be deducted.
 Timesheet **MUST** be emailed to timesheets@ftworkforce.com.au by 12noon EACH SUNDAY.

Employee & Supervisor to complete					Supervisor Signature	OFFICE USE ONLY		
Day	Date	Start	Lunch	Finish				
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								

As supervisor, I confirm that the hours above are correct for payment & invoicing and confirm they will not be disputed.
TIMESHEET MUST BE SIGNED DAILY BY SUPERVISOR OR WAGES WILL NOT BE PAID.