



Unit 22, New Brook House
 385 Alfreton Road, Nottingham
 Nottinghamshire
 NG7 5LR
 Tel: 01158 224820

info@isamerchealthcaresolutions.co.uk
 www.isamerchealthcaresolutions.co.uk

WEEKLY TIME SHEET

Timesheets must be posted, faxed or handed in by Monday 12pm or Tuesday 12pm if Monday falls on a Bank Holiday, in order to facilitate payment on the Friday. If faxed, please ensure you also send the original copy in the post.

Name	Post/Band	Booking Reference Number	Payroll Number

Name of Client	
Ward/Department	
Address	

	Date	Start Time	Finish Time	Break	Normal Hours Worked	Bank Hol. Hours	Authorised By
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Total Hours							

Approved Signatory:

I am the authorised signatory for my ward/department. I am signing below to confirm that the job profile title and hours worked are accurate and I approve of the payment. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings.

Print Name: Signature: Date:

Temporary Worker: I declare that the information I have given on this form is correct and complete. By signing below i am agreeing to continue to be bound by the Terms of Engagement by Isamerc Healthcare Solutions. A copy of these terms is available upon request.

Print Name: Signature: Date:

PLEASE SIGN AND RETURN THE **WHITE** COPY TO ISAMERC HEALTHCARE SOLUTIONS. **PINK** COPY TO BE KEPT BY THE CLIENT, **YELLOW** COPY TO BE KEPT BY THE TEMPORARY WORKER.