

## TIME SHEET Ref No:

All time sheets must be posted or handed in at the Head Office address (above) by Monday in order to facilitate payment.

Home / Client Service User			
Address			
Telephone No.		Week Ending (Sunday)	
Name of Ward / Unit		Qualification / Post	
Candidate / Nurse Name		Candidate / Nurse Signature	
NMC No.		Others	

Day rates are charged on hourly worked from 08:00 to 20:00. Night rates are charged on hours worked from 20:00 to 08:00. Saturday rates are charged on hours worked from 08:00 Saturday. Sunday rates are charged on hours worked from 08:00 Sunday to 08:00 Monday. Bank holidays are charged on hours worked from midnight on the start of the holiday to midnight on the following day.

Details of Assignment									
DAY	DATE	START (DAY)	FINISH (DAY)	START (NIGHT)	FINISH (NIGHT)	NO. OF HOURS	BREAK TIME	ORDER NUMBER	AUTHORISED BY
Mon									
Tue									
Wed									
Thu									
Fri									
Sat									
Sun									
Total Hours									
Mileage	Mon	Tue	Wed	Thu	Fri	Sat	Sun		

Total Pay Hours in Words

The above named member of Weston Care worked the hours shown above and by signing this Time Sheet we agree to pay your account in accordance with your Terms of Business. We also understand and agree that if we engage the applicant permanently within six calendar months we shall further agree to pay your introduction fee for permanent staff.  
I understand that a further copy of the Terms of Business is available upon request.

AUTHORISED BY		PRINT NAME	
POSITION HELD		DATE	

PLEASE SIGN AND RETURN THE **WHITE & PINK COPIES** TO WESTON CARE SERVICES  
**BLUE COPY** TO BE KEPT BY THE TEMP, **YELLOW COPY** KEPT BY THE CLIENT