



RECRUITMENT

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TIME SHEET

Candidate Name:
Candidate Address:
Profession:
Grade / Band:
Establishment Name:
Establishment Address:
Timesheet No (for office use only)

HOURS WORKED AT NORMAL RATE

Table with 7 columns: ON-CALL/STANDBY RATE, DAY, DATE, START TIME, FINISH TIME, LENGTH OF MEAL BREAK, TOTALS. Rows for Mon-Sun.

Please use the 24 hour clock TOTAL HOURS WORKED

HOURS WORKED AT ENHANCED RATE

Table with 10 columns: W/END RATE, EVENING/ CALL OUT RATE, PUBLIC HOLIDAY RATE, OTHER RATE, DAY, DATE, START TIME, FINISH TIME, LENGTH OF MEAL BREAK, TOTAL. Rows for Mon-Sun.

I DECLARE THAT THE ABOVE IS CORRECT AND I WILL REIMBURSE THE AGENCY IF I AM OVERPAID AS A RESULT OF ANY ERROR.

WE CONFIRM OUR AGREEMENT TO THE TERMS AND CONDITIONS OF BUSINESS AND THAT THE HOURS CLAIMED ARE CORRECT.

CANDIDATE SIGNATURE

CLIENT SIGNATURE

PRINT NAME

PRINT NAME

Candidate Declaration
I declare that the information given is correct and I have not claimed elsewhere for the hours / shift details above.

Client Declaration
I am an authorised signatory for my establishment / ward / department. I am signing to confirm that the grade of agency worker and the hours / shift that I am authorising are accurate and I approve payment.

These timesheets are governed by our standard Terms and Conditions including those set out in our SLA's, National Contracts and Candidate Handbooks. (T&C available on request)
1. Please press firmly using a black ballpoint pen. 2. Please return form by fax to 020 7833 3507, thank you.