



WEEK COMMENCING

Weekly timesheet

WORKING TIME REGULATIONS 1998 REGULATION 9 · NATIONAL MINIMUM WAGE REGULATIONS 2015 REGULATION 59

NAME	EMPLOYER	PAYROLL OR STAFF NUMBER	TRADE OR GRADE	SUPERVISOR
------	----------	-------------------------	----------------	------------

DAY	DATE	JOB OR SITE	START	FINISH	BREAKS	HOURS WORKED	OVERTIME	TRAVEL	NOTES: LEAVE, SICK, DAY WORKS
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									

TOTAL HOURS	TOTAL OVERTIME	TOTAL TRAVEL	DAYS OF LEAVE OR SICKNESS
-------------	----------------	--------------	---------------------------

SIGNED BY THE WORKER	APPROVED BY	DATE
----------------------	-------------	------

I CONFIRM THESE ARE THE HOURS I WORKED THIS WEEK.

APPROVED FOR PAYROLL. QUERIES ARE SETTLED WITH THE WORKER BEFORE THE PAY RUN.

PROJECT	DOCUMENT Weekly timesheet	REVISION	DATE	PAGE 1 of 2
---------	------------------------------	----------	------	----------------

A whole crew's week on one page

[illegible]

SIGNED BY THE SUPERVISOR	DATE	APPROVED BY THE OFFICE	DATE
--------------------------	------	------------------------	------

PROJECT	DOCUMENT Weekly timesheet	REVISION	DATE	PAGE 2 of 2
---------	------------------------------	----------	------	----------------