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 The Deep Business Centre // Hull // East Yorkshire // HU1 4BG

Name	Job Title
Ltd Company (if applicable)	Week Ending Date (Sunday)

**PLEASE NOTE: NO TIMESHEET, NO PAY**

Shift Details TO BE COMPLETED BY THE WORKER						Authorisation on Behalf of Client TO BE COMPLETED BY THE CLIENT	
Day	Date	Start Time	End Time	Breaks	Hours Worked Minus Breaks	Signature*	Print Name
MON							
TUE							
WED							
THUR							
FRI							
SAT							
SUN							
<b>TOTAL HOURS</b> (Minus Lunch Breaks)							

**Health & Safety**

1. I confirm that I have received a workplace induction from the Client
2. I confirm that I have received Health & Safety information relevant to my assignment from the Client
3. I confirm I do not have any Health & Safety concerns regarding this assignment in the Clients workplace

Your Signature ..... Date .....

Client Organisation ..... Site Location .....

**Timesheet Checklist**

1. Timesheets must be submitted to the above address/fax by 5pm Monday to ensure prompt payment
2. Any timesheets received after Monday will be processed the following week
3. Ensure that all boxes are accurately completed to prevent errors in pay or payment delays.

\*Your signature is authorisation that the hours shown are correct and the work was performed satisfactorily with prescribed specification, that you have received and accepted Dutton Recruitment's current terms of business and that lunch and break hours are deducted from the total of number of hours that have been signed for.