



TIME SHEET

Weekly Work Report

Name _____ Employee ID #: _____ Week Ending _____

Name of Facility _____ Facility Location _____

Day	In Time	Out Time	Daily Total
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Total Hours Worked: _____ **Employee's Signature:** _____

(I certify that the above hours are correct.)

Supervisor Signature: _____ **Date** _____

- Important:** Return card to Agency by Monday of the following week
- *Your employee ID # must be on your time card. *PRINT your FULL name
- *The week ending date would be the same Friday that you receive a paycheck for the prior work weeks.
- *Total your daily hours, then grand total the bottom.
- *Sign the bottom of the card to authorize that the times that are entered are times that you did work
- *Your supervisor at the placement company **MUST** sign at the bottom of the card to authorize the payment for you.