

TIMESHEET



TIMESHEET MUST BE RECEIVED BY 12:00PM ON MONDAY

Email: recruit@jobapp.uk

Fax: 01895 717933

132 Great Ancoats Street, Manchester
M4 6DE Tel: 020 8123 1983

| | |
|----------------------|-------------|
| NAME | WEEK ENDING |
| NATURE OF ASSIGNMENT | REPORT TO |
| COMPANY NAME | |

| | DATE | START TIME | FINISH TIME | BREAK | POA | TOTAL HOURS WORKED |
|-----------|------|------------|-------------|-------|-----|--------------------|
| MONDAY | | | | | | |
| TUESDAY | | | | | | |
| WEDNESDAY | | | | | | |
| THURSDAY | | | | | | |
| FRIDAY | | | | | | |
| SATURDAY | | | | | | |
| SUNDAY | | | | | | |

Please ensure your break is deducted from the total hours and if you do not take a break, please write NB. Client must sign to confirm NB otherwise this will automatically be deducted.

Candidate (This is a legal requirement):

I understand I am obliged to provide all working time regardless of whether I work for Job App or any other employer. I confirm that the information set out in this timesheet is completely accurate and I understand that PCN fines will be deducted directly from my salary and any falsification of the information contained in this timesheet may result in prosecution and/or the termination of my engagement with Job App

I declare that the information I have given on this timesheet is correct, complete and that I have not claimed elsewhere for the hours/shifts detailed on this timesheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable to prosecution and civil recovery proceedings. I consent to the disclosure of this information from this form to and by any Job App authorised body for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Signed: _____

Name: _____

Date: _____

Client (This is a legal requirement):

I am an authorised signatory of the above named client and I am signing to confirm that the hours/shifts on this timesheet are accurate and we approve payment. I consent to the disclosure of the information from this form to and by any Job App authorised body for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud. I confirm that I/we understand and agree to Job App's current terms of business. A standard introduction fee as per our terms of business will be charged if one of our candidates is taken on full time by yourselves or engaged through a different agency.

Signed: _____

Name: _____

Position: _____

Date: _____