



# Time Sheet

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 Web: [www.socialworks.org.au](http://www.socialworks.org.au)  
 Phone: 02 9218 2334  
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<b>Assignment Details:</b>			<b>Week Ending Date:</b> (Sunday)			<b>Name of Employee:</b>		
<b>Contact Email:</b>			<b>Position Held:</b>			<b>Company Name:</b>		
<b>Address:</b>			<b>Department:</b>			<b>Reporting To:</b>		
<b>Hours Worked: [Enter 24hr format Eg. 17.00]</b>						<b>Time in Lieu</b>		
DAY	DATE	START TIME	LUNCH	FINISH TIME	Hours/Min	Time in Lieu Claimed	Time in Lieu Taken	On Call
Mon	/	:	:	:				
Tues	/	:	:	:				
Wed	/	:	:	:				
Thur	/	:	:	:				
Fri	/	:	:	:				
Sat	/	:	:	:				
Sun	/	:	:	:				
<b>TOTALS</b>						<b>Time in Lieu Owed carry forward</b>		
Times are to be entered to the nearest 15 minutes (eg. 9.15am not 9.20)								
<b>Authorisation:</b>								
<b>1. Employee:</b>								
I certify the details shown on this form are true and accurate and no injuries were sustained neither was I involved in any critical incidence(s) during this period of my assignment. I also understand I am paid in accordance with the details in my letter of appointment.								
Name:			Signature:			Contact Phone:		
<b>2. Client Authorisation:</b>								
I verify that details shown on this form are true and correct, that the work was performed in a satisfactory manner and that I understand that staff are supplied in accordance with your terms and conditions.								
Name:			Signature:			Contact Phone:		
Time sheets <b>MUST</b> be authorised by both the Employee and the Client prior to submitting to ABRS Socialworks. Please fax completed Time Sheets to (02) 9281 7223 by <b>no later than 12 midday on Monday</b> to allow wages to be prepared in time for deposit in to the Employee's back account. Please retain a copy of all your time sheets for your own personal records.								