

TIME SHEET

Employee Name: _____

Site: _____ Supervisor: _____



***NB: Minimum of 38 hour week**

	DATE	JOB	START TIME ON SITE	BREAK	END TIME ON SITE	TOTAL HOURS LESS BREAK	TRAVEL FROM	TRAVEL TO	TOTAL TRAVEL TIME	BONUS S/CRETE	BONUS DRILLING	BONUS ROPE ACCESS	BONUS SITE SPECIFIC	MANAGER VERIFIED	Improvement:				
															Daily Works Completed				
MON																			
TUES																			
WED																			
THURS																			
FRI																			
SAT																			
SUN																			
TOTALS:																			
Extra comments:																			
Employee Signature:										Date:									
Supervisor's Name:										Date:					Vehicle rego: Exp Date:				
Supervisor's Signature:															Kms to date:				
															Service due:				
															Repairs needed:				