

Timesheet

Week ending _____ (Sunday)

Please fax to 04 9201696 or email accounts@keyskills.co.nz by **MONDAY at 5pm**

| Day | Date | Start time (7.30am) | Lunch (30mins/1 hour) | Finish time (4.30pm) | Total Hours worked |
|-------------------------|------|------------------------|--------------------------|-------------------------|-----------------------|
| Monday | | | | | |
| Tuesday | | | | | |
| Wednesday | | | | | |
| Thursday | | | | | |
| Friday | | | | | |
| Saturday | | | | | |
| Sunday (Week Ending) | | | | | |
| | | | | Total | |

Please tick the box if:

- You have **not** been inducted onto this workplace
- You have **not** been shown the safe working practices for your job
- You have **not** been involved in this workplace's toolbox/safety talk this week
- You do **not** know where the first aid kit is on this workplace
- You do **not** have all the safety gear you need for this job

If you have anything else you need to discuss (ie any **hazards** on site that are not being dealt with) please call us or write a note here:

Authorisation

I hereby confirm the hours on this timesheet are correct and agree to the Key Skills Terms & Conditions.

Client name: _____ Project (or P.O. Number) _____

Supervisor name: _____ Supervisor signature _____

I hereby confirm I worked these hours.

Candidate name: _____ Candidate signature _____

Payslips: Your payslips are available **online**, call Key Skills for your "iPayroll ID number", use this to access all your pay records online at <http://www.ipayroll.co.nz/>