



Timesheet

Company: _____

Week Ending: _____

Worker: _____

PLEASE ENSURE TIME SHEETS ARE COMPLETED AND FAXED BACK TO PLATINUM ON **0845 50 50 432** NO LATER THAN **10.00am MONDAY** OR RETURNED TO PLATINUM RECRUITMENT CONSULTANCY, SUITE 4, 1ST FLOOR, RICHMOND HOUSE, YELVERTON RD, BOURNEMOUTH, DORSET, BH1 1DA - TELEPHONE 01202 203 150

DAY	DATE	START	FINISH	START	FINISH	BREAKS	TOTAL HOURS
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
PO Number (if applicable):							Total Hours After Break
Total Written Hours To Pay							

Please note timesheets received after 10.00am Monday will not be processed until the following week

Final time sheet for this assignment?
(please tick relevant box)
Yes No

CLIENT CONFIRMATION

I confirm that the hours shown above are correct and authorised for payment

Signed: _____

Date: _____

Print Name: _____

Position: _____

Booking Assessment - To help us ensure all bookings are carried out to the Platinum standard of excellence, we invite you to complete the below assessment at the end of the shift or week. Please tick the box that is appropriate to reflect the standard of work completed by the temporary worker.

Excellent

Good

Satisfactory

Not Satisfactory

Comments: _____