Worldwide Travel Staffing

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Employee Timesheet - Due before noon every Monday

Facility: Knute Nelson Home Care & Hospice – D.S.P.s

Facility Address: 116 8th Ave SE Suite 142, Little Falls, MN 56345

Week Beginning: _____ **Week Ending:** _____

Employee Name: _____

NOTES: An entry must be recorded for every day of the work week. For those days that you did not work any hours, you must list one of the following reasons under "Time In" for that day: Not Scheduled (NS), Called in Sick (CS) or Pre-approved Time Off (PTO). Do not leave any days blank. PLEASE USE BLACK INK ONLY.

Day	Date	Time In	Time Out	(-) Lunch	Total	Supervisor Authorization
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
				Total Hours		

If you worked less than your target weekly hours or missed a scheduled shift, please provide an explanation.

_____

_____ _____

Employee Signature Date Supervisor Signature Date

1) The most efficient way to report your weekly hours is to take a picture of your facility verified timesheet and send it via text message to your recruiter's cell phone prior to noon every Monday. Please make certain the image is clear, readable, and captures all four corners of the document.

2) Alternatively, you can email a copy of your facility verified timesheet to your recruiter. Simply include the timesheet as an email attachment. Please make certain the image is clear, readable, and captures all four corners of the document. You can also fax a copy of the of your facility verified timesheet to your recruiter at 1-877-375-2450. **PLEASE USE BLACK INK ONLY**.