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Employee Timesheet - Due before noon every Monday

acility: Vall	ley Hi Nursing	g Home					
Neek Beginni	ing:	Week Ending:					
imployee Na	me:						
list one of the	e following reaso		" for that day: N	ot Scheduled (N		not work any hours, (CS) or Pre-approved	
Day	<u>Date</u>	Time In	Time Out	<u>(-) Lunch</u>	<u>Total</u>	Supervisor Autho	rization
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
				Total Hours			
f you worked	less than your	target weekly ho	urs or missed a	scheduled shif	t, please provid	e 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.