

Employer's Name:	Employee's Name:
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IMPORTANT - COMPLETION NOTES, PLEASE READ:
 Enter Rate of Pay = Enter the appropriate hourly rate of pay.
 Hours for Payment = Record the number of hours worked in the columns below. Please take care to ensure that the hours are entered under the correct date and Rate of Pay column.
 Holiday = Enter 'H' for Holiday in the Holiday Indicator column against the relevant date. Also record the number of hours holiday that are to be paid in the appropriate Rate of Pay columns. Please ensure that your employee has not exceeded their holiday entitlement, and record the holiday on your Personal Assistant Holiday Form provided.
 Sickness = If your employee is absent from work due to illness, enter 'Sick' in any column against every date that they are ill.

Prodisability must receive the hours for payment a minimum of 7 working days before your pay date.

	Holiday Indicator	Hours for Payment	Hours for Payment	Hours for Payment	Hours for Payment		Holiday Indicator	Hours for Payment	Hours for Payment	Hours for Payment	Hours for Payment
Enter Rate		@ £	@ £	@ £	@ £	Enter Rate		@ £	@ £	@ £	@ £
	Date	Week One					Date	Week Two			
Mon						Mon					
Tues						Tues					
Wed						Wed					
Thurs						Thurs					
Fri						Fri					
Sat						Sat					
Sun						Sun					
	Date	Week Three					Date	Week Four			
Mon						Mon					
Tues						Tues					
Wed						Wed					
Thurs						Thurs					
Fri						Fri					
Sat						Sat					
Sun						Sun					
Checked and Authorised for Payment:						TOTAL					

Employee's Signature:	Date:
Employer's Signature:	Date:

Please keep this timesheet for your records, or if returning to Prodisability, then please make sure that all the columns are completed and a summary form is attached.