



Daily Timesheet

Candidate name			School/Client		
Address				Department	
W/E Date		Reporting to			

Please submit one timesheet for each week worked

	Date	AM	PM	Days	
Mon					
Tue					
Wed					
Thu					
Fri					
Sat					
Sun					
				Total Days	

Additional Hours

No. of Hours		Reason	
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Additional Hours to be paid pro-rata of daily rate (division of 7.5 hours)

Declaration

- I confirm that the information I have given on this form is complete and correct and I have not claimed elsewhere for the hours/shift detailed on this timesheet.
- I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings.
- I consent to the disclosure of information from this form to 3rd parties and by public sector bodies for the purposes of verification of this claim and the investigation, prevention, detection and prosecuting of fraud.

Authorisation

- I am an authorised signatory for the Client stated above in compliance with internal processes and procedures. I am signing to confirm that both the grade and hours of the temporary worker stated above is accurate and that I approve payment.
- I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings.
- I consent to the disclosure of information from this form to 3rd parties and by the public sector bodies for the purposes of verification of this claim and the investigation, prevention, detection and prosecuting of fraud.

I (as the candidate) confirm I have read, understood and agreed to your terms and conditions (please tick to confirm)

As authorised signatory, I confirm that the information above is correct and can be invoiced. I also confirm that we have received a copy of your Term & Conditions.

Candidate signature		Print name		Date	
Authorised School/ Client signature		Print name		Date	
Position				Order No. (if known)	

Our terms of engagement you or your company signed apply to this booking. Any candidate taken on a full-time/candidate or bank basis, or wishing to change agencies will be subject to the notice period as set out in those terms.

Fraud – any questionable timesheet must be immediately brought to the attention of Total Assist Compliance; in confidence, at: 01708 388 033 or compliance@totalassist.co.uk.

Referral Bonus (Candidate use only)

Please add the name and contact details of a colleague. You will receive between £100 - £150 after your colleague has worked 1 full week.

Name		Tel		Email	
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NOTE: To avoid delay with your payment, please ensure that all hours worked are authorised and the timesheet reaches us no later than Monday 10.00 am via fax: 020 8252 7879 or by post: Total Assist Education, Blackburn House, 22-26 Eastern Road, Romford, RM1 3P