Weekly Time Sheet

Customer: _____

Supervisor: _____

Employee: _____

Job Location: _____

Week Ending: _____

Shift: Day ☐   Night ☐   Arvo ☐

| | Work Times | | | | | | Office Use Only | |
	Date	Job Description	Start	Break	Finish	Total Hours	Total Norm	Total T*1.50
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
			TOTAL HOURS WORKED:					