

Health Care *INNOVATIONS*

Staffing
 7701 Grand River Suite 100
 Brighton, MI 48114

Fax (800)476-2066 **Please call to confirm that your time sheet has been received** Phone (877)765-7500

Weekly Time Sheet With Breaks

Week Ending Saturday: _____

Employee Name: _____ (date)

Facility: _____

Manager Name: _____

Time sheets must be received by 12 noon on Mondays and must be accompanied by a manager's signature*. No exceptions.

| Date | Sunday | | Monday | | Tuesday | | Wednesday | | Thursday | | Friday | | Saturday | |
|---------------------------------|----------------|---------------|----------------|---------------|----------------|---------------|----------------|---------------|----------------|---------------|----------------|---------------|----------------|---------------|
| | Month/Day/Year | | Month/Day/Year | | Month/Day/Year | | Month/Day/Year | | Month/Day/Year | | Month/Day/Year | | Month/Day/Year | |
| Unit | | | | | | | | | | | | | | |
| Start Time | | AM - PM | | AM - PM | | AM - PM | | AM - PM | | AM - PM | | AM - PM | | AM - PM |
| MEAL BREAK | Time Out | | | | | | | | | | | | | |
| | Time In | | | | | | | | | | | | | |
| End Time | | AM - PM | | AM - PM | | AM - PM | | AM - PM | | AM - PM | | AM - PM | | AM - PM |
| Total Regular Hrs | | | | | | | | | | | | | | Reg: |
| Total OT Hrs | | | | | | | | | | | | | | OT: |
| Total Orient Hrs | | | | | | | | | | | | | | Orientation: |
| Supervisor Signature for OT Hrs | | | | | | | | | | | | | | |

ALL shifts 8 hours in length or longer will include a 1/2 hour UNPAID break unless indicated on your timesheet.

If you did not take a break for ANY reason, please note it on your timesheet, have the manager approve the change and you will be paid for the appropriate time.

 Employee signature Date

 Manager signature Date

NOTE: Employee signature and Supervisor approval certifies the hours/times shown here are correct

~ All overtime must be pre-approved and timecard must include proper overtime approval in order to be paid at overtime rate.

~ Use the space below to document any unusual circumstances related to your timecard. Example: 9/22/07 - stayed over to cover for late employee

~ Time cards available to download on our website www.hcinnov.com.

***In some instances the manager may be unavailable; if so, please find an alternate signer/authorizer**