

LEADING. RESPECT. PROFESSIONAL DETERMINATION. FLEXIBLE. INTEGRITY. QUALITY. SMART. ACKNOWLEDGE. TECHNICAL DRIVEN. **PROTECH WEEKLY TIMESHEET – WESTERN AUSTRALIA**
PLEASE HAVE YOUR SUPERVISOR EMAIL/FAX YOUR AUTHORISED TIMESHEET TO: TIMESHEETPERTH@PROTECH.COM.AU OR 07 3440 2898

Company Name:	Site Name:	Week ending Date:
Print Employee Name:	Employee Position:	Employee Signature:
Print Supervisor Name:	Supervisor Position:	*Supervisor Signature:

EMAIL TO: timesheetperth@protech.com.au or FAX TO: 07 3440 2898 BY MIDDAY EACH MONDAY
 Please Note: LATE TIMESHEETS MAY NOT BE PROCESSED UNTIL THE NEXT WEEK.
 We CANNOT ACCEPT timesheets that are not received from AND signed by your supervisor.
 For any queries or to contact Protech Business Services (Payroll) - Phone: 07 3440 2800

***SITE SAFETY CONFIRMATION**
 Please note: By Signing this Timesheet above you are confirming that all the Site Safety tasks across have been completed by this employee.
 If this is incorrect advise your Protech Consultant *immediately*.

On Site Induction	Site/Task Specific Training
Initial Tasks Supervised	Work Method/JSA Provided

Day	Date	Shift (D) (A) or (N)	Enter in 24 hour Format		Meal Break	Total	Extra Information (Please note here all relevant information) e.g. Cost Code/Description/Site/Unit/Job No	Protech Internal Use Only PLEASE LEAVE ALL INSIDE DBL LINES BLANK			
			Start	Finish				ORD	1.5x	2x	2.5x
Monday	/		:	:	:						
Tuesday	/		:	:	:						
Wednesday	/		:	:	:						
Thursday	/		:	:	:						
Friday	/		:	:	:						
Saturday	/		:	:	:						
Sunday	/		:	:	:						

BANKED UNITS		Total Hours	<input style="width: 50px; height: 20px;" type="text"/>
Note: Banked Units will only be processed if there is an Employee Banking Units Agreement in place. Please contact your Protech Rep for details.			
Bank <input type="checkbox"/>	Units: _____		
Pay <input type="checkbox"/>	Units: _____		

TOTALS:			
JO		DATE	CLIENT CODE
EXT BY	ENT BY	PO NOS	DAYS
NOTES/ALLOWANCES			