TimeSheet



Candidate									
Name:				Payro	Payroll/ld Number:				
School / Nurs	sery								
Name:		Postcode:							
Timesheet for Week Commencing Monday					(Insert date)				
Please comple	ete either the	Daily Paid o	or Hourly Paid A	Assignment bo	ох				
Daily Paid Assi	ignment	Diegos	tick to confin	m the days u	roulcod bol				
Please tick to confirm the days worked below									
Whole Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total	
AM Only								\vdash	
PM Only								+-+	
Please enter the hours worked below									
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total	
Start Time									
End Time									
Hours Worke	d								
Candidate I co	onfirm that I hav	ve worked the d	lays/hours detailed	I above and that	the information	on given on this	timesheet is a	ccurate.	
Candidate I confirm that I have worked the days/hours detailed above and that the information given on this timesheet is accurate. Signed Print Name									
	days/hours at		ed by the above- ates. I also agre						
Signed				Position	Position				
Print Name				Date	Date				

In order to ensure prompt payment for the days/hours worked, it is important that Step Teachers receives this timesheet by the Monday of the following week. Please return the timesheet via:

- Fax to 020 8882 3687
- Email a clear, in-focus scanned copy to timesheets@stepteachers.co.uk
- Post to Payroll, Step Teachers Ltd, South Point House, 321 Chase Road, London, N14 6JT.





