



TAG HR

The Associates Group Human Resources
Since 1990

TAG HR Employee Weekly Timesheet

Submit your timesheet via:

EMAIL: finance@taghr.com; reception@taghr.com

(cc Recruiter)

OR FAX: (613) 567 - 6441

TIMESHEETS ARE DUE BY FRIDAY AT 5:00PM AND MUST BE SIGNED BY THE SIGNING AUTHORITY.

ALL FIELDS MUST BE FILLED OUT IN ORDER TO RECEIVE PROMPT PAYMENT.

OMISSIONS ARE UNACCEPTABLE.

TIMESHEETS ARE CANDIDATES' RESPONSIBILITY.

EMPLOYEE NAME:

DEPARTMENT:

WORK ADDRESS:

WORK PHONE # :()

EMPLOYEE SIGNATURE: X _____

EMPLOYEE CERTIFICATION: BY SIGNING THIS TIMESHEET, I HEREBY CERTIFY THAT I HAVE WORKED ALL THE HOURS REPORTED ON THIS TIMESHEET AND THOSE HOURS HAVE BEEN WORKED IN ACCORDANCE WITH MY MOST CURRENT EMPLOYMENT PLACEMENT CONTRACT. ANY OVERTIME WORKED WAS APPROVED BY THE CLIENT PRIOR TO BEING WORKED AND WRITTEN APPROVAL WAS SENT TO TAG HR.

OVERTIME IN THE PROVINCE OF ONTARIO IS HOURS WORKED IN THE EXCESS OF 44 HOURS PER WEEK.

TIMESHEET FOR THE WEEK OF: (dd/mm/yy)

SUNDAY

FROM:

TO:

	DATE	TIME IN	LUNCH	TIME OUT	DAILY HOURS
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					
				TOTAL HOURS	

STATS: indicate "STAT" in the respective row and 0 for the total for that day. STAT pay is calculated for eligible candidates by TAG HR.

MISSED WORK DUE TO ILLNESS: indicate "SICK" in the respective row and 0 as the total for that day.

CHANGES: must be initialed by the signing authority.

HOURS MUST BE REPORTED IN THESE INCREMENTS:

- 15 MINS = 0.25 HOURS
- 30 MINS = 0.50 HOURS
- 45 MINS = 0.75 HOURS
- 60 MINS = 1.00 HOURS

X _____

SIGNING AUTHORITY APPROVAL SIGNATURE

DATE (dd/mm/yy)

X _____

NAME OF SIGNING AUTHORITY (PLEASE PRINT CLEARLY)

()

SIGNING AUTHORITY PHONE NUMBER