

# TIMESHEET

**Please complete in BLACK INK**

It is your responsibility to ensure this form is fully completed and received by us. Please ensure you include your name, the school name, and also your Servoca office, so that we are able to quickly resolve any queries

NAME:  
  
ADDRESS:

SCHOOL:  
  
SERVOCA EDUCATION OFFICE:

	DATE	AM	PM	DAYS
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				
<b>TOTAL</b>				

AS AUTHORISING SIGNATORY, I CONFIRM THAT THE ABOVE HOURS ARE TOTAL HOURS TO BE INVOICED

SCHOOL SIGNATURE ..... DATE .....

*(we are unable to accept timesheets which have not been signed by the school's signatory)*

CANDIDATE SIGNATURE ..... DATE .....

**Please fax this timesheet to 0208 518 4550 or 0870 889 7135 on Friday afternoon. The deadline for timesheets is Monday at 4pm.**

OUR FULL STANDARD TERMS & CONDITIONS APPLY TO THIS ASSIGNMENT, ANY TEMPORARY MEMBER OF STAFF EMPLOYED DIRECTLY BY THE SCHOOL, FULL OR PART TIME, WILL INCUR OUR STANDARD INTRODUCTION FEE.

IF YOU ARE WORKING THROUGH A PAYROLL SERVICES PROVIDER, YOU MUST MAKE A SEPARATE CLAIM FOR ANY EXPENSES INCURRED  
**REFER A FRIEND OR COLLEAGUE AND TOP UP YOUR WAGES WITH A £100 BONUS!!**



The above named person has worked the hours shown above and we agree to pay your account and abide with your terms of business, which are available on request

