

Shared Home Timesheet

HOME: DATE:	STAFF NAME:							PAY PERIOD:									
	MON	TUES	WED	THURS	FRIDAY	SAT	SUN	MON	TUES	WED	THURS	FRIDAY	SAT	SUN			
MORN SHIFT (MON- FRI) e.g. 6.30am-9am																	
AFTERNOON SHIFT (MON-FRI) –e.g. 3pm-8pm																	
EVENING SHIFT (MON-FRI) e.g. 3pm-10.30pm																	
WAKE SHIFTS e.g. 10.30pm-12am/ 12am-6.30am																	
SLEEPOVER (✓)																	
SPLIT SHIFT (✓)																	
Overtime (✓)																	
SATURDAY – ALL SHIFTS																	
SUNDAY – ALL SHIFTS																	
PUBLIC HOLIDAY																	
LIFESTYLE SUPPORT CLIENT FOR THIS HOUSE ONLY																	
NAME:																	
NAME:																	
NAME:																	
NAME:																	
SICK LEAVE																	
ANNUAL LEAVE																	
NON-CONTACT																	
WAKE HOURS (YES)																	
ORIENTATION (TIMES)																	
MEETINGS (TIMES)																	
TRAINING (TIMES)																	
EXPENSES IN \$																	
KILOMETRES																	
LIFE ENRICHMENT - SC Permission ONLY NAME:																	
TICK APPLICABLE ATTACHMENTS/APPROVALS BELOW:																	
WAKE HRS SHEET attached () RECEIPTS Attached () RECEIPTS EXPLANATION SHEET Attached () MED CERT. Attached () KLM SHEET Attached () NON-CONTACT Approval () ANNUAL LEAVE ()																	
ORD	SHIFT	SAT	SUN	1.5 OT	2 OT	SOA	S/S	KLMS	REC \$	S/L	A/L	MEET	P/H 1.75	P/H 2.5	TRAIN NWSS	TRAIN PART	ORIENT