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## TIMESHEET

NAME:  
  
ADDRESS:

SCHOOL:

	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.....

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

**Please fax this timesheet to 0870 889 7135 or 020 8518 4550 on Friday afternoon. The deadline for timesheets is on 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!!**

**Quality Mark**

department for  
children, schools and families

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

