



delivering
people
solutions

TEMPORARY TIMESHEET

Client Company: _____

Week Ending: _____

Temporary's Name: _____

Temporary's Position: _____

TEMPORARY'S AGREEMENT

I hereby certify that the hours shown were worked by me on this assignment. I also agree to treat all work performed on this assignment as strictly confidential. If I should be asked to submit my Resume or offered work either of a contract, temporary or permanent nature by the above-named client, I will notify Metro Temps before supplying my Resume and before acceptance of any position.

All time sheets must be received by Monday, 8am at Metro Temps offices for weekly payment of wages - timesheets can be emailed or faxed. No payment will be made without the submission of a signed timesheet.

DAY	AM START	AM FINISH	PM START	PM FINISH	TOTAL HOURS
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
				TOTAL HOURS	

TEMPORARY'S SIGNATURE: _____

CLIENT AGREEMENT

The Client hereby accepts the offer of Metro Temps to provide the services of this Temporary employee and agrees to being invoiced the agreed hourly rate for the above signed-off total hours each week. A copy of this timesheet will accompany the invoice and all future bookings of this temporary employee must be made via Metro Temps or Metro Recruitment Ltd.

PLEASE NOTE: If this temporary employee via this Company is offered any type of permanent or contract employment within 12 months of referral date, Metro Recruitment Ltd is entitled to scale fees for the appointment and will invoice the Client.

CLIENT NAME: (Please print) _____

JOB TITLE: _____

CLIENT SIGNATURE: _____

IMPORTANT: Please take a copy of the completed and client-signed timesheet and leave with the client for their reference.