



# Placements

## TIMESHEET

TopPro Fax Number: 011 326-4930

Candidate: \_\_\_\_\_ Position: \_\_\_\_\_  
 Client: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 Client Tel: \_\_\_\_\_ Contract Period: \_\_\_\_\_  
 Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Day of Week	Date	Starting Time	Meal Intervals		Finishing Time	Total Hours each day	Total Overtime Hours/Day
			ON	OFF			
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
<b>Total Number of hours worked each week</b>							

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Client: \_\_\_\_\_ Pstion: \_\_\_\_\_  
 Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_