

WEEKLY TIME SHEET

Fresh Staffing Solutions

Printed Employee Name: Printed Facility Name:					Instructions: Round time to the nearest quarter hour. If you work a shift that begins one day and ends the next day, record all time for that shift in the column of the day the shift begins. Upload your prior week's timesheet to Workforce Portal prior to Sunday at 8:00am, failure to do so may result in delayed compensation and disciplinary action, up to and including termination.			
	Sunday	Monday	Tuesday	Wednesday		Thursday	Friday	Saturday
Date								
Shift Start Time								
Shift End Time								
Hours								
Orientation Shift	Orientation	Orientation	Orientation	Orientation		Orientation	Orientation	Orientation
Orientation Start								
Orientation End								
No Break Exception Facility Authorized Initial Required	No Break	No Break	No Break	No Break		No Break	No Break	No Break
On Call Start								
On Call End								
Total Hours Worked								
Shift Approval By Facility Supervisor Must Sign First and Last name	x	x	x	x		x	x	x

Orientation/No Break Exceptions:

Facility agrees to orient GrapeTree employee to facility upon first worked shift at facility. All orientation shifts must have Orientation box checked as well as a facility authorized signature in the Shift Approval By Facility section to be considered a complete time sheet.

Facility must approve any missed/skipped breaks. The No Break box must be checked and a facility authorized supervisor must initial behind or next to the No Break box on this time sheet. If No Break Exception is not checked and initialed, payroll will deduct for a break depending on facility break requirements.

Employee Authorization:

Employee Signature

By my signature, I certify that the information and hours reported above are accurate and reflect my actual hours worked. I understand that incorrect information may result in a payroll adjustment and that deliberate incorrect or misleading information may result in a payroll adjustment and/or disciplinary action. Further, I understand that if any of above information is missing from this timesheet, my timesheet will be considered incomplete and I will receive pay for the above reported hours on the following pay date.

Date

TIME SHEET REQUIREMENTS AND SUBMISSION



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- Valid signed time sheets should be texted to 815-365-6400 by 10:00am on Monday each week. Time sheets received after the deadline, or without signature, may be paid with the following week's time sheets.
- GrapeTree Medical Staffing will enter the times/breaks directly from the time sheets into our accounting system. Please be sure that all breaks are marked clearly if they were not taken as we will be taking a break automatically if there is not a note stating no break was taken.