

Timesheet

THANK YOU
FOR
WORKING
WITH ITP

To help us pay you promptly, please ensure that all sections are completed in full. Please write in BLOCK CAPITALS using a ball point pen. We are unable to pay you without a copy of a signed timesheet.

FOR OFFICE USE ONLY

REF:



Week Ending Sunday

First Name(s)

Last Name

Role (Please tick)

Teacher

Nursery
Nurse

Classroom
Assistant

Other

Norman House
110-114 Norman Road
Greenwich
London SE10 9QJ
www.itper.com
tel: 0845 290 6000
fax: 0845 290 2022
email: info@itper.com

School Details - School Name

School Post Code

School Address including town

1. TO BE COMPLETED BY THE TEMPORARY WORKER

I certify that I have received and read ITP Education Resourcing's terms and conditions and that I have carried out the work detailed below

Please enter a cross (X) in the appropriate box for each day worked

Day	Dates	AM	PM
Mon		<input type="checkbox"/>	<input type="checkbox"/>
Tue		<input type="checkbox"/>	<input type="checkbox"/>
Wed		<input type="checkbox"/>	<input type="checkbox"/>
Thu		<input type="checkbox"/>	<input type="checkbox"/>
Fri		<input type="checkbox"/>	<input type="checkbox"/>
Overtime (hours)			
Total			

Temporary
Workers
Signature

2. TO BE COMPLETED BY THE CLIENT SCHOOL

We certify that the attendance and services as stated on this timesheet have been satisfactory and that no claim will be made against ITP's invoice. We acknowledge having received and understood your terms of business.

Name

Position

Date signed

Authorising
Client
Signature

3. EXPENSES CLAIMED (NON RECEIPTED)

ONLY TO BE COMPLETED BY TEMPORARY WORKERS WORKING THROUGH MY KEY PAY.

In accordance with Sections 336 to 339 of ITEPA 2003, I confirm that I am site-based and claim £2 for Use of Home as Office for the week as well as the following:

I confirm that I left home before 7:00 am on:	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	and claim a breakfast allowance of £5 for each of these days
I confirm that I worked at the client's site on:	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	and claim a lunch allowance of £7.50 for each of these days
I confirm that I was away from home for more than 10 hours in pursuit of my duties on:	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	and claim a late working meal allowance of £15 for each of these days
I confirm that my mileage to and from the client's site was:	Mon <input type="text"/>	Tue <input type="text"/>	Wed <input type="text"/>	Thu <input type="text"/>	Fri <input type="text"/>	
Vehicle Type	<input type="radio"/> Bicycle <input type="radio"/> Motor Cycle <input type="radio"/> Car/Van					

PLEASE ENSURE THAT YOUR TIMESHEET IS RETURNED TO US NO LATER THAN 12 NOON THE FOLLOWING MONDAY

