



## Barmat Healthcare

*Meeting your needs and exceeding your expectations.*

**SECTION 1:** Please write in BLOCK LETTERS your full name on the first line, client's details on the second line and your work location on the third line.

NAME	
CLIENT NAME	
WORK LOCATION	

**SECTION 2:** Please write your total hours worked less any breaks. Hours to be taken to the nearest ¼ hour

DATE	DAY	START	FINISH	BREAK	TOTAL HOURS. Excl breaks	COMMENTS
	MONDAY					
	TUESDAY					
	WEDNESDAY					
	THURSDAY					
	FRIDAY					
	SATURDAY					
	SUNDAY					
TOTAL HOURS WORKED						

Please email all timesheets to [Timesheets@barmathealthcare.co.uk](mailto:Timesheets@barmathealthcare.co.uk) by 12:00 PM every Monday

<p><b>Nurse:</b> I declare that the information I have given on this timesheet is correct and complete and that I have not claimed these shifts/hours elsewhere. I understand that by providing false information on this timesheet I may be liable to disciplinary action, prosecution and civil recovery proceedings by Barmat Healthcare Ltd. I consent to the disclosure of information on this timesheet to and from Barmat Healthcare Ltd for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.</p>	<p><b>STAFF NAME:</b></p> <p><b>SPECIALITY:</b></p>	<p><b>DATE:</b></p> <p><b>SIGNATURE:</b></p>
<p><b>To be Authorised by a senior member of staff:</b> I am an authorised signatory of the above named client in section 1. I sign to confirm that the band of agency worker, job title, location and hours are accurate and I approve payment. I understand that by providing false information on this timesheet I may be liable to disciplinary action, prosecution and civil recovery proceedings by Barmat Healthcare Ltd. I consent to the disclosure of information on this timesheet to and from Barmat Healthcare Ltd for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud. A standard introductory fee of 20% will be charged if the nurse is taken on full time or engaged through another agency.</p>	<p><b>NAME:</b></p> <p><b>POSITION:</b></p>	<p><b>DATE:</b></p> <p><b>SIGNATURE:</b></p>