



**PROTECH WEEKLY TIMESHEET – NORTH QUEENSLAND**

**PLEASE EMAIL YOUR TIMESHEET TO:  
TIMESHEETTOWN@PROTECH.COM.AU**

<b>Company Name:</b>		<b>Site Name:</b>		<b>Week Ending Date:</b>		<b>Emp. Ref:</b>	
<b>Print Employee Name:</b>		<b>Employee Position:</b>		<b>Employee Signature:</b>			
<b>Print Supervisor Name:</b>		<b>Supervisor Position:</b>		<b>Supervisor Signature:</b>			

**EMAIL SCANNED TO: timesheettown@protech.com.au BY MIDDAY EACH MONDAY**

Please Note: LATE TIMESHEETS MAY NOT BE PROCESSED UNTIL THE NEXT WEEK.  
We CANNOT ACCEPT timesheets that are not signed by your supervisor.

**\*SITE SAFETY CONFIRMATION**

Please note: By Signing this Timesheet above you are confirming that all the Site Safety tasks across have been completed by this employee. If this is incorrect advise your Protech Consultant *immediately*.

On Site Induction	Site/Task Specific Training
Initial Tasks Supervised	Work Method/JSA Provided

Day	Date	Shift (D) (A) or (N)	Enter in 24 hour Format		Meal Break	Total	Extra Information (Please note here all relevant information) e.g. Cost Code/Description/Site/Unit/Job No	Protech Internal Use Only PLEASE LEAVE INSIDE OF DOUBLE LINES BLANK				
			Start	Finish				ORD	1.5x	2x	2.5x	Shift
Monday	/		:	:	:							
Tuesday	/		:	:	:							
Wednesday	/		:	:	:							
Thursday	/		:	:	:							
Friday	/		:	:	:							
Saturday	/		:	:	:							
Sunday	/		:	:	:							

**Total Hours**

BANKED UNITS	
<small>Note: Banked Units will only be processed if there is an Employee Banking Units Agreement in place. Please contact your Protech Rep for details.</small>	
Bank	Units: _____
Pay	Units: _____

If meal breaks are left blank – 30 minutes will be deducted.

<b>TOTALS:</b>						
JO		DATE		CLIENT CODE		
EXT BY	ENT BY	PO NOS			DAYS	
NOTES/ALLOWANCES						