

DentAide Time Sheet

Please fill out your timesheet after **every shift**. | Please have practice representative sign off after **every shift**.

| Employee Name: | | | Position: | | | | | | | | | |
|-----------------------|------|-------|-----------|--------|-------------|---------------|-----------------|------------------|------|----|------|--|
| Practice/Client Name: | | | | | | | | | | | | |
| Day | Date | Start | Break | Finish | Total Hours | Employee Sign | Supervisor Sign | Payroll Use Only | | | | |
| | | | | | | | | T1 | T1.5 | T2 | T2.5 | |
| Monday | | | | | | | | | | | | |
| Tuesday | | | | | | | | | | | | |
| Wednesday | | | | | | | | | | | | |
| Thursday | | | | | | | | | | | | |
| Friday | | | | | | | | | | | | |
| Saturday | | | | | | | | | | | | |
| Sunday | | | | | | | | | | | | |
| | | | | Totals | | | | | | | | |

| Practice/Client Use Only | |
|---|--------------|
| Pay Period Ending (SUNDAY of each week) | DD / MM / YY |
| Name of Authoriser | |
| Signature of Authoriser | |

DentAide Time Sheet Instructions

Please fill out your timesheet after **every shift**. | Please have practice representative sign off after **every shift**.

For the Practice

- Please ask the nurse to fill out the timesheet with the correct hours worked including all breaks and total hours (if the break is not recorded on the timesheet then we have to pay the nurse for that time).
- Please check that the nurse has correctly filled out the practice name.
- A practice representative must sign beside each shift to confirm that the hours and breaks are correct.
- The Principal of the practice must date and sign to authorise all shifts before we can pay the nurse.
- Please send completed timesheets back to us (email: melissa@dentaide.com.au or fax: 03 9656 9799) by Monday of the following week at the latest.

For the Dental Assistant

- Place your name and the practice where you are working at the top of your timesheet.
- Please complete your timesheet at the end of your shift including all your breaks.
- Give your timesheet to your practice manager or principal to sign off before you leave.
- The practice will forward your timesheet to us.