



Highfield House
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 Website: www.mimosastaffing.co.uk
 Registered in England No. 7590909 VAT No. 173884861

Date	
Name	
Mimosa Staffing ID No.	
Pin (Registered Nurses Only)	
Client	
Ward	
Band	

No.	
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PLEASE USE BLACK INK, BLOCK CAPITALS & 24 HOUR CLOCK

Day	Date	Start Time	Finish Time	Breaks Taken	Booking Reference	Total hours after deduction of breaks	Authorised Signature
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Instructions to Complete Time Sheet

Time sheet must be signed by the person authorised to sign at the end of each shift. Avoid use of correction fluids. All amendments must be clearly crossed out and initiated by the person authorised to sign. Time sheets can be faxed, posted or scanned to the office. Complete a separate time sheet for different wards/units. All breaks must be taken.

Declaration by Agency Worker

I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts details on this timesheet. I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable to prosecution and civil recovery proceedings.

Total Hours in Words

Signature Date / /

Print Name (Capitals)

Induction / Orientation - I have / have not been given an induction / ward orientation.

Name Signature

Declaration by Authorised Person

I am signing below to confirm that the hours worked, band and staff, which I am authorising, are accurate.

Signature Date / /

Print Name (Capitals)

Client Feedback

We would greatly appreciate it if you could provide us with a follow up assessment for this agency worker's time at this hospital. Please note that this information may be used as a reference for future temporary positions. Please tick the box which most reflects your view on the worker.

	Excellent	Good	Average	Poor		Excellent	Good	Average	Poor
Clinical Skills					Appearance				
Relationship with Patients					Professionalism and Conduct				
Relationship with Colleagues					Punctuality				

Client Signature	Date / /	Future Employment - Would you be happy to receive this agency worker again? Yes / No
Print Name (Capitals)		

TIME SHEETS TO BE SUBMITTED TO MIMOSA OFFICE NO LATER THAN 12PM MONDAY-TO BE PAID ON FRIDAY

Day Rate: Mon - Fri, 06:00hrs - 20:00hrs Night Rate: Mon - Fri, 20:00hrs - 06:00hrs Night Rate: Sun Midnight - Mon 06:00hrs
 Saturday Rate: Fri Midnight - Sat Midnight Sunday Rate: Sat Midnight - Sun Midnight Bank Holiday Rate: Midnight to Midnight

White copy for Agency - Yellow copy for client - Pink copy for Agency Worker

Any questionable timesheet must be brought immediately and confidentially to the attention of the NHS Fraud and Corruption Reporting Line - Freephone 0800 028 40 60