



# Vasco medix

## Time Sheet

**Section 1: Please use BLOCK letters and complete all fields**

Candidate Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Client Name: \_\_\_\_\_

**Section 2: Please use BLOCK letters. Also use 24hr scheme to indicate time.**

Day	Date (DD/MM/YY)	Ward/ Dept.	Booking ref no.	Client Authorised	Shift start time	Shift finish time	Shift break	Total hours worked (excluding break)
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								

**Total Payable Hours:** \_\_\_\_\_

**Section 3: Please rate the candidate by circling the letters (A= Excellent, B= Good, C= Satisfactory, D= Poor)**

Clinical skills delivered in the line with the requirements of the position	A	B	C	D
Relationship with patients, co-workers and public	A	B	C	D
Management of workload and timekeeping	A	B	C	D
Communication skills	A	B	C	D
Record keeping	A	B	C	D
Reliability	A	B	C	D

**Section 4: Please print in the details (except signature)**

By signing below you declare the information given above is correct and accurate. Any false information can lead to disciplinary action and will be liable for prosecution and civil recovery proceedings.

Candidate Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Client Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Hospital Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_