

DUE MONDAY BEFORE 3:00 PM CT

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Employee Name

Employee Signature *

* By signing, the employee certifies that the hours listed below are true and correct

Date

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Hospital / Facility

Authorized Client Facility Signature *

Date



Download the App!

Submit your timesheets using your phone. Simply find and download the Medical Solutions app at iOS App Store or Google Play.

* By signing, the client certifies that the hours listed below are true and correct, and will pay according to the hours listed below.

Regular Hours (Please show time worked in military time)

	Date	Time in	Lunch out	Lunch in	No lunch	Time out	Total hours	Campus	Reason short guaranteed hours <small>circle one</small>	Comments
WED		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	
THR		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	
FRI		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	
SAT		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	
SUN		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	
MON		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	
TUES		:	:	:	Check if no lunch <input type="checkbox"/>	:			cancelled / volunteered to leave / sick / personal	

If guaranteed hours are not met, please specify reason:

Comments:

Call Hours

	On call		Total on call
	Date	Time in / Time Out	
WED		:	
THR		:	
FRI		:	
SAT		:	
SUN		:	
MON		:	
TUE		:	

Call Back

	Call Back			Total call back
	Date	Time in	Time out	
WED		:	:	
THR		:	:	
FRI		:	:	
SAT		:	:	
SUN		:	:	
MON		:	:	
TUE		:	:	

Call back Reason				

Instructions

1. Please be sure to list all in and out times including lunch times, not just total hours worked.
2. Please note any exceptions in the space marked comments (no lunch, stayed late on case, left early, sent home by hospital, etc.).
3. Time is calculated by actual in/out times and is not rounded unless specified by hospital protocol.
4. Show time worked in MILITARY TIME please.
5. Undocumented lunch breaks will be deducted @1/2 hour per day unless noted (no lunch).