

**APPRENTICE/TRAINEE FORTNIGHTLY TIMESHEET – MINE**

<b>EMPLOYEE NAME:</b> _____  <b>MINE:</b> _____  <b>FORTNIGHT ENDING</b> /    /						To be paid correctly and on time, all signatures and hours must be filled in correctly <b>TIMESHEETS MUST BE RECEIVED BEFORE 3PM MONDAYS</b>											
						<b>Pay Codes</b>											
						WK AL	Work Annual Leave	SL PHW	Personal Leave Public Holiday Worked	CR PHT	College Release * Public Holiday Taken	WD RDO	Wet Day RDO Taken				
Day	Date	Start Time	Lunch		Finish Time	Pay Code	Total Hrs	Late Crib		SUPERVISOR AUTHORISATION (Please print name)	NT	TH	DT	Comments			
			On	Off				Hrs	Supervisor Init.								
MON																	
Day/night		am/pm			am/pm												
TUE																	
Day/night		am/pm			am/pm												
WED																	
Day/night		am/pm			am/pm												
THU																	
Day/night		am/pm			am/pm												
FRI																	
Day/night		am/pm			am/pm												
SAT																	
Day/night		am/pm			am/pm												
SUN																	
Day/night		am/pm			am/pm												
MON																	
Day/night		am/pm			am/pm												
TUE																	
Day/night		am/pm			am/pm												
WED																	
Day/night		am/pm			am/pm												
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Day/night		am/pm			am/pm												
FRI																	
Day/night		am/pm			am/pm												
SAT																	
Day/night		am/pm			am/pm												
SUN																	
Day/night		am/pm			am/pm												
<b>* COLLEGE TRAINER SIGNATURE REQUIRED</b>						<b>TOTAL HOURS</b>		<b>Late Crib must be signed by Supervisor to be paid</b>									
<b>EMPLOYEE AUTHORISATION – I hereby certify the hours stated are true and correct:</b>  Signature: _____						<b>PLEASE CIRCLE YOUR ROSTER:</b>  7 hr days  5 DAY 12 HR      7 DAY 12 HR A      B      C      D  DAY                    1      2      3      4				<b>PLEASE CIRCLE IF YOU WORKED AN OVERTIME SHIFT</b>  M    T    W    T    F    S    S				<b>MRAEL OFFICE USE ONLY:</b>			