

NURSES TIMESHEET

NURSE ON CALL Dublin Office: 59 Ranelagh, Dublin 6 **Fax No:** (01) 4965690 (01) 4062079 **Email:** nursesaccounts@nurseoncall.ie

FO103

TIMESHEET for Week beginning Sunday _____

Name: _____

Address: _____

Tel: _____ PPS Number: _____ Email: _____

	Date	Hospital/Client	Ward/ Details	Time	Shift Hours	Nominal Amount €	Signed by Person-in-Charge	PRINT Name & Title
	Sunday							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Saturday							

Timesheet should reach NOC by 12midday Tuesday. If you require immediate payment write EXPRESS on timesheet.

HSE rates apply. Please PRINT all clearly

Total=

AccountHolders Name	
Sort Code	
Account Number	

An Bord 1st Reg Date

If ABA date not entered, lower rate Tier2 will be paid

For nurses payroll queries call (01) 4965199 and press Option # 1
The Payroll Dept take calls and queries Mon-Fri 9am-1pm

Nurses Signature: _____

Date: _____

Break Times

The following breaks are assumed to have been taken & will be deducted. **If longer or shorter breaks are taken please indicate on your signed time sheet.** Statutory coffee breaks taken on the ward can be ignored.

Total Shift Length (Hrs)	Break Time (Hrs)	Total Shift Length (Hrs)	Break Time (Hrs)
8	½ hour	11	1 hour
9	½ hour	12	1 hour
10	¾ hour	13	1 hour

Please note that these break times may be made up of several shorter breaks at the request of management if necessary (e.g. a 1 hour break over a twelve hour shift may be made up of a ½ hour and two ¼ hour breaks).