

Contractor's name _____

Performance Evaluation (Completed by Supervisor)

Participant Name: _____

Worksite: _____

Month/Year: _____

Work Schedule (Show as Times – i.e. 1-4):

Mon	Tue	Wed	Thu	Fri	Sat	Sun

Max Allowable Hours Week/Month: (Circle Week or Month):

	Above Average	Satisfactory	Needs Improvement (Comments Required)
Attendance/Punctuality			
Communication Skills			
Grooming/Dress			
Motivation/Attitude			
Progress			
Supervisor Initials: _____			
Comments: _____			

Use Ink only, no pencil or white out on the timesheet. Initial all changes

Worked Hours with Start and End Times							Absences				
Circle Date	Start Time	Out for Meal Break	Back from Meal Break	End Time	Total Hours Worked	Holiday Hours	Participant Called In Absent (yes/no)	Reason for Absence	Excused (E) or Unexcused (U)		Hours Absent from Work
									Spvr	Coord	
1	16										
2	17										
3	18										
4	19										
5	20										
6	21										
7	22										
8	23										
9	24										
10	25										
11	26										
12	27										
13	28										
14	29										
15	30										
	31										
TOTAL HOURS											

I certify the information contained on this time sheet is true and correct.

Participant Signature: _____ Date Signed: _____

Supervisor Signature: _____ Date Signed: _____

Coordinator's Signature: _____ Date Signed: _____

It is the worksite supervisor's responsibility to make sure all timesheets are filled out completely and correctly, complete the performance evaluation, sign the timesheet, and submit the timesheet to _____ by _____.

Contractor

Date

Timesheet Instructions

1. The Worksite Supervisor must turn in timesheets to the Employment Placement Specialist no later than ___(time) on the timesheet due date:
FAX _____, or Address _____
2. If you need to FAX a timesheet, the original must be brought in or mailed within three (3) days following the timesheet due date.

Timesheets Must Be Neat and Easy To Read

1. Timesheets must be completed in dark ink, not pencil.
2. "Liquid Paper" or "White Out" is not allowed on timesheets.
3. Timesheets must be legible or we will ask for them to be re-done. (Optional)
4. Cross-outs must be initialed.

Timesheets Must Be Accurate

1. Do not add any hours in the "Excused or Unexcused Absence" columns to the "Total Hours Worked with Holidays" column total. **For excused absences you must call in to the worksite supervisor to explain the situation on or before the day you are to report to the worksite when possible, or as soon as possible thereafter** (WAC 388-310-0500 and Work Verification Plan, IIA, page 26-27). If there is an excused absence, the reason must be in the "Reason for Absence" column.

Examples of Excused Absences:

- Illness of self or immediate family
- Injury to self or immediate family
- Appointments if advance notice was given
- Death of immediate family
- Funeral of family member if advance notice was given
- No childcare for 1 day (provider ill, closed, quit, etc.)

Examples of Unexcused Absences:

- Appointments not cleared with supervisor in advance
- Childcare issues exceeding one day
- If you are able, but do not call in to get an excused absence.

2. A 30-minute meal break must be given if the parent is working over five (5) hours in any one shift. Meal breaks are unpaid. Do not include time spent on meal breaks in the "Total Hours Worked" column.

If entering fractions of an hour, use decimals according to the following guide: 1-15 minutes = .25; 16-30 minutes = .50; and 31-45 minutes = .75