



175 Dwight Road, Ste. 202
Longmeadow, MA 01106

phone: 413-731-6522
fax: 413-827-9664

EMPLOYEE AGREEMENT: I attest that all information on this time slip is accurate and acknowledge that any false information provided may result in my termination. I also agree that by signing this time slip I acknowledge that I must contact Worldwide Staffing upon completion of my scheduled shifts in order to provide further work availability. If I do not do so, Worldwide Staffing may assume that I have voluntarily resigned my position and I may be denied unemployment benefits in doing so.

EMPLOYER AGREEMENT: By my signature I attest that the shift information for which I am signing is accurate and performed under the most recent contract between FACILITY and Worldwide Staffing.

	DATE		UNIT/ FLOOR	TIME		BREAK	TOTAL	SUPERVISOR SIGNATURE
	MONTH	DAY		IN	OUT			
MON								X
TUE								X
WED								X
THU								X
FRI								X
SAT								X
SUN								X
<i>WEEK ENDING SUNDAY</i> / /				TOTAL HOURS				

TIME SLIPS ARE DUE MONDAY AT NOON

CLIENT NAME **x** _____
EMPLOYEE SIGNATURE _____
PRINT LAST NAME **TITLE**



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