

**Employee Instructions:**

1. Complete a separate timesheet for each assignment worked during the week
2. Print your name and property name – **time sheets with no name/location cannot be processed!**
3. Complete all columns for each day worked and total the hours for the week
4. Round times to nearest ¼ hour (see example below)
5. Timesheets must be signed by both employee and an authorized supervisor
6. Submit time sheets by **2:00 PM EST the following Monday** via:  
 TEXT: (404)800-6782 or EMAIL: timesheets@ApartmentStaffing.com



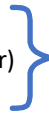
**PREMIER PLACEMENTS**

\_\_\_\_\_  
Employee Name (Print) - hereinafter referred to as 'Employee'

\_\_\_\_\_  
Property Name

**EXAMPLE:**

Employee arrives at 9:08 (rounds up to 9:15)  
 Employee takes lunch 12:02-12:55 (53min rounds to 1hr)  
 Employee leaves at 5:07 (rounds to 5:00)



START TIME	END TIME	LUNCH DURATION	TOTAL
9:15	5:00	1 hour	6.75

	DATE	START TIME	END TIME	(LUNCH DURATION)	TOTAL
<b>Mon</b>					
<b>Tue</b>					
<b>Wed</b>					
<b>Thu</b>					
<b>Fri</b>					
<b>Sat</b>					
<b>Sun</b>					

**TOTAL** \_\_\_\_\_

*By signing below, Employee agrees to contact Premier Placements, LLC by next regular workday at the conclusion of Employee assignment to make Employee available for new assignments. Employee understands and acknowledges that if Employee fails to do so, Premier Placements, LLC may assume that Employee has voluntarily quit without good cause associated with work and that such a voluntary quit may result in Employee being denied unemployment benefits*

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

*By signing this agreement, I certify that I am an authorized agent of the Management Company and/or Owner of the property. I agree that the hours stated above are accurate and that the work was performed in a satisfactory manner. If any employee works over 40 hours in a work week, I understand that 1.5 times the regular hourly billing rate will be charged.*

\_\_\_\_\_  
Supervisor Name (Print)

\_\_\_\_\_  
Supervisor Title (Print)

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
WTN/PO#