


EMPLOYEE NAME (PRINT)								COMPANY NAME	
SOCIAL SECURITY NUMBER								ADDRESS	
TIME WORKED TO NEAREST QUARTER HOUR									
	MON	TUES	WED	THURS	FRI	SAT	SUN		
DATE								Client companies employing GPS employees on their payroll prior to six months following the last day worked are liable for payment of a liquidated damages charge. There is no charge if the employee is maintained on GPS payroll continuously for 640 hours. The undersigned, being an authorized representative of the company, certifies that the total hours are correct and all work was performed satisfactorily.	
START TIME								AUTHORIZED SIGNATURE	
FINISH TIME								X	
LESS LUNCH								DATE	
HOURS WORKED								EMPLOYEE RETURNING NEXT WEEK? <input type="checkbox"/> YES <input type="checkbox"/> NO	
DEADLINE: TIME CARD DUE TO GPS BY 12:00 NOON ON MONDAY FOLLOWING THE WEEK WORKED.								I certify that the total hours shown were worked by me during the week indicated. I certify that I was not injured on the job unless so noted and reported.	
								TOTAL HOURS	
								EMPLOYEE SIGNATURE	
								X	
								RETURN - WHITE COPY TO GPS. KEEP - YELLOW COPY FOR EMPLOYEE.	

FOR OFFICE USE ONLY									
W/E	PAY RATE	BILL RATE	OVT BILL	OFC NO	REG HRS	OVERTIME	CLIENT NO	DEPT / PO#	

We want to ensure that our employees are performing at the optimum level for you.

Please answer the following questions for this employee:

Any attendance/tardiness issues? \_\_\_ Yes \_\_\_ No

Any performance issues? \_\_\_ Yes \_\_\_ No

Any other issues? \_\_\_ Yes \_\_\_ No