

HOURS WORKED LOG BOOK

Practitioner Name: DAVOREN, Christopher

Reference Number: MED0000098641

To be completed and forwarded to the Board as requested.

Please complete each column. In 'hours worked' please indicate *actual* hours worked not rostered hours, in 24 hour format, for example 0800 – 1700.

Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
21-05-2019	08:00	12:30	12:45	17:55			
22-05-2019	12:30	17:30	17:40	22:45			
24-05-2019	08:00	12:30	12:50	18:00			
25-05-2019	08:00	12:40	13:00	18:10			
26-05-2019	08:00	12:30	12:45	17:55			
27-05-2019	08:30	13:00	13:20	17:55			
28-05-2019	08:00	12:30	12:55	18:05			
29-05-2019	12:30	17:30	17:50	22:45			