

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
01-03-2020	11:40	17:15	17:40	21:50			
04-03-2020	15:35	21:35	22:00	01:05			
05-03-2020	15:45	19:40	20:05	23:20			
06-03-2020	15:45	20:40	20:50	23:30			
07-03-2020	11:10	19:00	19:20	23:40			
08-03-2020	11:55	18:25	18:50	22:05			
09-03-2020	16:00	20:40	20:50	23:35			
10-03-2020	15:45	20:35	20:55	00:45			
13-03-2020	15:50	19:50	20:00	22:55			
14-03-2020	11:45	18:10	18:35	22:20			
15-03-2020	12:40	19:35	19:55	23:15			

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Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
16-03-2020	16:10	22:05	22:25	01:35			
17-03-2020	14:05	19:10	19:25	23:50			
18-03-2020	15:45	20:55	21:15	23:55			
19-03-2020	15:20	20:00	20:20	22:40			
20-03-2020	07:35	12:30	12:45	15:55			
23-03-2020	08:40	13:45	13:55	16:40			
24-03-2020	07:50	13:10	13:25	16:15			
25-03-2020	09:10	13:00	13:10	16:25			
26-03-2020	07:50	13:25	13:50	16:45			
27-03-2020	07:55	12:45	13:10	16:50			
31-03-2020	06:35	14:15	14:35	21:25			