

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
01-01-2021	15:45	19:35	20:00	22:50			
04-01-2021	07:45	13:00	13:10	16:05			
05-01-2021	07:55	12:20	12:45	15:10			
06-01-2021	08:00	13:05	13:30	16:00			
07-01-2021	07:40	12:30	12:40	16:30			
08-01-2021	07:35	13:15	13:35	16:40			
11-01-2021	07:30	14:55	15:10	22:05			
12-01-2021	07:40	13:10	13:30	16:25			
13-01-2021	07:40	11:30	11:40	15:00			
14-01-2021	07:50	12:55	13:10	16:05			
15-01-2021	06:55	13:25	13:50	17:20			

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Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
18-01-2021	21:00	04:50	05:00	09:05			
19-01-2021	20:55	04:00	04:15	08:10			
20-01-2021	21:00	04:25	04:50	08:45			
22-01-2021	16:15	21:00	21:20	00:10			
28-01-2021	21:25	03:25	03:40	08:10			
29-01-2021	21:35	04:45	05:05	09:00			
30-01-2021	21:25	03:25	03:40	08:30			
31-01-2021	21:05	04:05	04:15	08:05			