

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
03-02-2021	16:05	20:20	20:45	23:55			
04-02-2021	16:05	20:50	21:15	23:35			
05-02-2021	16:20	19:55	20:20	23:20			
06-02-2021	12:30	19:20	19:30	23:25			
07-02-2021	12:00	18:55	19:15	23:00			
08-02-2021	08:25	13:30	13:50	16:30			
09-02-2021	08:50	13:20	13:35	16:00			
10-02-2021	08:05	15:00	15:25	18:50			
11-02-2021	07:40	13:00	13:10	16:10			
12-02-2021	07:25	13:10	13:30	16:35			
15-02-2021	08:10	13:00	13:10	16:45			

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Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
16-02-2021	06:50	13:00	13:25	16:50			
18-02-2021	10:55	14:15	14:35	16:15			
19-02-2021	07:20	12:00	12:15	16:15			
20-02-2021	07:50	N/A	N/A	12:00			
21-02-2021	07:35	N/A	N/A	12:10			
22-02-2021	16:00	20:35	21:00	23:50			
23-02-2021	16:05	20:15	20:30	00:10			
24-02-2021	15:35	20:15	20:35	23:30			
25-02-2021	14:05	19:15	19:40	22:15			
26-02-2021	07:35	12:45	13:00	15:50			