

**NURSING AND CARE PLACEMENT WORKSHEET**

JOB REF NO \_\_\_\_\_

WORK DATES \_\_\_\_\_

CLIENT:

FOR WEEK ENDING: \_\_\_\_\_  
ORDER CONTACT:

CLIENT ADDRESS:

CLIENT PHONE #:

NAME:

GRADE:

	DATE	IN	OUT	TOTAL	MILEAGE
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
			<b>TOTAL</b>		

TO BE COMPLETED AND SIGNED BY THE CLIENT (or authorised person employed by the Client)  
– **TAKE COPY AND LEAVE WITH CLIENT**

SIGNATURE: ..... NAME:..... POSITION: .....

**\*\*PLEASE NOTE: CLAUSE 5 OF TERMS:** The engagement or use by a Client of a Temporary Worker originally introduced by the Company to the Client, whether for a definite or indefinite period, or the introduction by the Client of such Temporary Worker to other employers with a resulting engagement, renders the Client subject to the payment of an introduction fee to the Company calculated at 10% of the assessed annual commencing gross taxable pay and taxable emoluments payable by the Client to the worker concerned, provided that the engagement takes place within a period of 6 months from the termination of any temporary assignment. The Company will not make a refund to the Client in the event of the subsequent termination of the engagement.

Hospitality & Catering	<b>Placing People First</b> Nursing & Healthcare Licensed by CSCI as a Nursing Agency	Education
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Email: [info@ashley-recruitment.co.uk](mailto:info@ashley-recruitment.co.uk)  
 Website: [www.ashley-recruitment.co.uk](http://www.ashley-recruitment.co.uk)

Ashley House, 382 Hartshill Road,  
 Hartshill, Stoke on Trent  
 ST5 1BT  
 Tel/Fax (01782) 629760  
 Mobile 07831 584105