

TIMESHEET

Timesheet for Leicester College

Learner's Full Name:

T: (0116) 2548881

E: info@learningsupportcentre.com

MONTH ENDING DATE: (Friday prior to 20th of month.)

<h3>Support Type</h3> <input type="checkbox"/> LSA Group (<i>Learning Support</i>) <input type="checkbox"/> LSA/Note-taking (<i>Additional Support</i>) <input type="checkbox"/> ESOL

Date worked	Time Started	Time Finished	Number of Hours	Learner(s) signature
				1
				2
				3
				4
				5
				1
				2
				3
				4
				5
				1
				2
				3
				4
				5
				1
				2
				3
				4
				5
				1
				2
				3
				4
				5

Total Hours worked	
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Name:	Signature:
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Please note that the Tutors/Leicester College Coordinators can sign this timesheet in the student's absence. Please print their name underneath their signature

Timesheets completed incorrectly will not be processed for payment

Week Number	Date of Session	Description of Activity	Learners Present	Learners Absent
			1	1
			2	2
			3	3
			4	4
			5	5
			1	1
			2	2
			3	3
			4	4
			5	5
			1	1
			2	2
			3	3
			4	4
			5	5
			1	1
			2	2
			3	3
			4	4
			5	5
			1	1
			2	2
			3	3
			4	4
			5	5