Charles Sturt University

PROFESSIONAL EXPERIENCE TIMESHEET

Preservice Teacher's Name	Service/School	Group	Associate Teacher(s)	Dates (inclusive)	
				/ /2011	/ /2011

The timesheet should be initialled **by the preservice teacher** and times shown on arrival and departure each day. Any leave days should be noted accordingly, i.e. Public Holiday, Sick, etc. **The information entered here is an auditing requirement in connection with payment of claims.**

DATE	MONDAY			TUESDAY			WEDNESDAY			THURSDAY			FRIDAY		
Week beginning Monday	Initials	Arrived	Depart	Initials	Arrived	Depart	Initials	Arrived	Depart	Initials	Arrived	Depart	Initials	Arrived	Depart

Under the terms of the P.S.B. Agreement, associate teachers are eligible to only claim for block placement days on which the preservice teacher is actively supervised.
Associate teacher was absent on : _____

Director's/Principal Name:

_____

Signature:

_____

(required to meet auditing regulations)

Please send this Time Sheet and all other documentation listed in the checklist to the preservice teacher's home campus.

School/Service Checklist

Have you submitted....?

Report ❑

Report signed by
- Preservice teacher ❑
- Associate teacher ❑
- Director/Principal ❑

Appropriate payment claim form attached ❑

Individual Claim
- Banking details submitted to HR ❑
- TFN Declaration form sent to HR ❑

For School/Service claim
- Tax Invoice made out to CSU ❑
  (including site ABN number and the words "Tax Invoice")