

CANDIDATE TIME SHEET

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CANDIDATE NAME: _____

LAW FIRM/CLIENT: _____ TELEPHONE: _____

CONTACT PERSON: _____

WEEK STARTING AND ENDING (SAT-FRI) _____

DAY	IN	OUT	IN	OUT	TOTAL
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SATURDAY: _____

SUNDAY: _____

MONDAY: _____

TUESDAY: _____

WEDNESDAY: _____

THURSDAY: _____

FRIDAY: _____

TOTAL HOURS WORKED THIS WEEK: _____

CANDIDATE NAME

SUPERVISOR'S SIGNATURE

DATED: _____

DATED: _____

