



Cooks for Hire
MANAGEMENT INC.

CFH Sign-In Sheet

Date	Print Name <small>Please enter your information neatly and only sign-out at the end of your shift</small>	Time In	Time Out	Break(s) taken	Regular Hours	Over Time <small>Must be authorized by a supervisor</small>	Employee Signature	Evaluation <small>Client use only Is Employee Evaluation Form completed and faxed?</small>	Hours Paid <small>CFH Management use only</small>
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	
								<input type="checkbox"/> Yes <input type="checkbox"/> No	

Manager Name: _____ Position: _____

Signature approval: _____ Date: _____

Please fax completed forms to: 604-618-3684