

Monthly Timesheet

ACTION NAME: xxxYYY
MONTH: DECEMBER 2018

Name of Beneficiary: Client
Name of Person working on the action: Name Surname
Type of Personnel: Senior Researcher

Cal. Day	Reas. for Absence	Action Type	Hours
1	WE	-	0.0
2	WE	-	0.0
3	-	RE	6.0
4	-	RE	6.0
5	-	RE	6.0
6	-	RE	6.0
7	-	RE	6.0
8	WE	-	0.0
9	WE	-	0.0
10	-	RE	6.0
11	-	RE	6.0
12	-	RE	6.0
13	-	RE	6.0
14	-	RE	6.0
15	WE	-	0.0
16	WE	-	0.0
17	-	RE	6.0
18	-	RE	6.0
19	-	RE	6.0
20	-	RE	6.0
21	-	RE	6.0
22	WE	-	0.0
23	WE	-	0.0
24	-	RE	6.0
25	PH	-	0.0
26	PH	-	0.0
27	-	RE	6.0
28	-	RE	6.0
29	WE	-	0.0
30	WE	-	0.0
31	-	RE	6.0
Total:			114.0

Absences	
Weekend	WE
Public Holiday	PH
Other Absence	OA

Action Types	
Research	RE
Dissemination	DI
Other Type	OT

Date & Signature of Person working on the action

Date & Signature of Supervisor