

# Manual Monthly Time Sheet



Name:	Soumya Vaz						PPT. No.:	L7567776			Project No:						From: 1-Oct-25															
Designation:	Assistant Cost engineer						B. No.:	209240			Location: Abu Dhabi						To: 31-Oct-25						Date: 15-Oct-25									
Job Code	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	Total (Hrs)
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Normal Hours	9	9	9	W	W	9	9	9	SL	SL	W	W	9	9	9	SL	SL	W	W	9	9	9	9	9	W	W	9	9	9	9	171	
Fixed Over Time ( Restricted to those contractually eligible for FOT)																																
Current Month OT (Restricted to Weekends & public Holidays Only)																																
Previous Month OT																																

## Employee Signature

Name: Soumya Vaz

Designation: Assistant Cost engineer

Signature:

Date: 15-Oct-25

## Project Approval

Name: NAWAF M. KHOJA

Designation: Business Administrator

Signature:

Date

In order to easily read your Time Sheet, please use as follows;

### Time Sheet Legend

P/8 - Normal contract hours are 8

P/10 - Normal contract hours are 10

W - Week-end

H - National Holiday

AL Annual Leave

RR Rest & Recreation

SL Sick Leave

CL Compassionate Leave

UL Unpaid Leave

### For Junior Staff Only

Contractual Hrs		Remarks	
Normal	FOT		
8	2	Use FOT row to enter FOT hours. Use OT row for weekends & PH up to max. of 10 hours	
8	0	Use OT row to enter max 2 hours OT during workweek and up to max. of 10 hours on weekends & PH	
10	0	No FOT or OT entries allowed during workweek. Up to max 10 hours allowed on weekends & PH	

### Sick Leave Certificate

#### شهادة إجازة مرضية

Date:

09-10-2025

تاريخ:

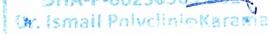
#### Patient Information

Patient Name	SOUMYA VAZ FREDRICKS VAZ	اسم المريض
Patient File No.	0026273666	رقم ملف المريض
Visit Type	Outpatient	نوع الزيارة
Date of Admission	N/A	تاريخ الدخول
Date of Discharge	N/A	تاريخ الخروج
Patient Passport No/Emirates ID	N/A / 784198871543710	رقم بطاقة الهوية / رقم جواز السفر
Employer	Private	جهة العمل
Employer Name	Indman Recruitment LLC SPC	إسم جهة العمل

#### Sick Leave Information

Diagnosis - ICD Code	Acute gastritis without bleeding (K29.00) (K29.00), Vomiting (R11.10) (R11.10), Fever (R50.9) (R50.9)	اسم ورقم التشخيص
Sick Leave From, To	09-10-2025, 11-10-2025	الإجازة المرضية من ، إلى
Sick Leave Period	3	مدة الإجازة المرضية
Physician Remarks		ملاحظات الطبيب

#### Physician Information

Physician Name	Muhammed Zubair	اسم الطبيب
Physician Title	General Practitioner-General Practice	تخصص الطبيب
Facility Name	DR. ISMAIL POLYCLINIC	اسم المنشأة
Physician Signature		توقيع الطبيب
Physician Stamp		ختم الطبيب

#### Remarks:

- This certificate is electronically issued and does not require a DHA stamp or attending DHA for manual attestation.
- For the purpose of verification of this certificate, please visit DHA Website: <https://services.dha.gov.ae/sheryan/wps/portal/home/services-professional/online-verification> and enter the Security code & Certificate No. mentioned below.

ملاحظات:  
- يتم إصدار هذه الشهادة إلكترونياً ولا تتطلب ختم الهيئة أو الحضور لتصديقها

- لفرض التحقق من هذه الشهادة ، يرجى زيارة موقع هيئة الصحة بدبي:  
<https://services.dha.gov.ae/sheryan/wps/portal/home/services-professional/online-verification>  
وإدخال رمز و رقم الشهادة المذكورين أدناه.



PIN: 7717  
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