

STAT Medical Staffing Time Slip

Employee: _____

Classification:

RN

CNA

LPN

Homemaker/Sitter

Facility: _____

Day	Date	In	Meal Time	Out	Total Hours	Client Initials
Sun						
Mon						
Tues						
Wed						
Thu						
Fri						
Sat						
Total						

1. STAT Medical Staffing has the sole right to establish the wages and benefits, and assumes responsibility for the payment of such compensation, the withholding and payment of such compensation, the withholding and payment of all required payroll taxes and the maintenance of Worker's Compensation Insurance as required by law.
2. Client acknowledges that STAT Medical Staffing has incurred substantial recruitment, screening and marketing expenses with respect to Temporary Employees and that the identity, telephone number, address and work history of Temporary Employees constitutes trade secrets of STAT Medical Staffing. Client agrees not to directly or indirectly employ, offer to hire, or hire any Temporary Employee assigned to you during any assignment for a period of 180 days after completion of an assignment without written consent of (Your Agency Name Here). If found to be in violation, client promises to pay STAT Medical Staffing a fee equal to 20% of employees' annual salary.
3. STAT Medical Staffing invoices reflect payroll already paid to employees for services provided to Client. Client agrees to payment terms of Net upon receipt of the invoice and that late fees will accrue on unpaid balances after 30 days of receipt of the invoice at the rate of 1.5% per month (18% per year). Client agrees to pay all late fees.
4. Client agrees that if Temporary Employee works more than (40) hours in any workweek for STAT Medical Staffing that Temporary Employee is entitled to compensation at the hourly rate of time and one-half for such overtime hours. Client agrees to pay STAT Medical Staffing at one-half (1.5) times the hourly-billed rate for all such overtime worked. Client agrees to pay STAT Medical Staffing one-half (1.5) times the hourly-billed rate if Temporary Employee works the following Holidays: Memorial Day, Independence Day, Labor Day, Thanksgiving Day, The Day after Thanksgiving, Christmas Eve, Christmas Day and New Years Eve, New Years Day. Client agrees to pay STAT Medical Staffing a 4-hour daily minimum.
5. Client's signature certifies that the hours shown are correct, that the work was performed to the Client's satisfaction and authorizes STAT Medical Staffing to bill Client for the hours worked by the named Temporary Employee. The client agrees that the time slip submitted by fax transmission shall be acceptable for billing purposes.
6. Client agrees to reimburse STAT Medical Staffing for all expenses and reasonable attorney's fees it may incur to enforce any right to a jury trial in any proceeding between Client and STAT Medical Staffing.

Client Signature _____

Date _____