Monthly time-sheet

Project Reference	
Name of Beneficiary/ Partner	
Name of staff member	
Is staff member employed Full-time or Part-time?*	
Calendar Year	
Calendar Month	

*indicate number of working hours per day, week or month

Calendar Day	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
In case of absence, indicate one of the reason codes below																															
Hours worked on this LIFE-project																															
Hours worked on second/ further LIFE-project*																															
Other activities																															
Total hours (including overtime)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

*indicate project reference(s)

Absences	
Weekend	WE
Sick leave	SL
Public holidays	PH
Annual holidays	AH
Other absence	OA

Summary for this month	
Hours worked on this LIFE-project	0.0
Hours worked on another LIFE-project	0.0
Other activities	0.0
Total hours (including overtime)	**0.0**

Date and signature of staff member

Date and signature of Project Manager/ Coordinator/Responsible