

WORK SCHEDULE CHANGE / ASSIGNMENT FORM

Human Resource Services

Last Name Katz	First Name Dhara	Employee A Number		FTE: 0.5
Position Title Office Assistant 2		Position is O ☑ Yes □ N	vertime Eligible lo	Position Number 4117
Date of Request / Notice July 9, 2019	Start Date of Change August 1, 2019		End Date of Change	(if temporary)

Human Resource Services must review and ensure compliance with work hour requirements

SCHEDULE	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Current Week 1							
Lunch Period							
Current Week 2 (if different from Week 1)							
Lunch Period							

SCHEDULE	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Proposed Week 1				10:00 - 6:30	10:00 - 6:30	11:00 - 3:00	
Lunch Period				1:00-1:30	1:00 - 1:30	None	
Proposed Week 2 (if different from Week 1)							
Lunch Period							

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☐ The Proposed work schedule is eligible for Shift Premium (Majority of time spent working between 5PM & 7AM)						
Business need for Schedule Change:						
	⊠ Establish Schedule for New Employee	☐ Permane	Permanent Change			
Check All That Apply:	☐ Supervisor's Notice to Employee	☐ Tempora	☐ Temporary Change			
	☐ Employee's Request to Supervisor	☐ For Training Purposes				
	☐ Mutually Agreed Change	cy Sche	dule Change			
☐ Prior written n	otice of schedule change was given to employee or	n Month:	Day:	Year:		
Supervisor Signature //////			Date	7-9-244		
<u> </u>						
Employee Signature			Date			

Original: Human Resource Services Revised April 2014