



Chancellor's Office Irregular or Flexible Work Schedule Request

I, _____, _____
(Name) (Division)

hereby request authorization to work an/a _____ irregular* _____ flexible** work schedule, with work hours scheduled as follows:

Monday	from	_____	to	_____	# of hours	_____
Tuesday	from	_____	to	_____	# of hours	_____
Wednesday	from	_____	to	_____	# of hours	_____
Thursday	from	_____	to	_____	# of hours	_____
Friday	from	_____	to	_____	# of hours	_____
						Total Hours _____

Permanent change, effective _____.

Temporary change, for the period _____ through _____.

OVERTIME: While I am assigned to work the irregular work week schedule specified on this form, I understand that time worked within my regularly scheduled shift will not be considered overtime.

HOLIDAYS: During weeks in which legal holidays occur, I understand that I will return to a work week schedule consisting of five 8-hour days.

Work Schedule Definitions:

* Irregular: a 40-hour per week schedule, other than five 8-hour day with set starting and stopping times.

** Flexible: a 40-hour per week schedule which varies the number of hours worked on a daily basis, but not necessarily each day OR a 40-hour per week schedule in which starting and stopping times vary on a daily basis, but not necessarily each day.

Requested by:

Employee's Signature

Date

Approved by:

Supervisor's Signature

Date