



WORK SCHEDULE/SHIFT CHANGE NOTICE

							Date of Request
Last Name		First Name		Middle Initial		Employee Number	
Class Title				Position is Overtime Eligible <input type="checkbox"/> Yes <input type="checkbox"/> No		Current Position Number	
Effective Date		Work Location or Unit					
Schedule/Shift	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Current Week 1							
Current Week 2							
Proposed Week 1							
Proposed Week 2							
Program Need for Schedule/Shift Change – Not required if new schedule was mutually agreed to.						New Position Number (if changed)	
Check All That Apply: <input type="checkbox"/> Supervisor's Notice to Employee <input type="checkbox"/> Employee's Request to Supervisor <input type="checkbox"/> Mutually Agreed Change <input type="checkbox"/> Permanent Change <input type="checkbox"/> Temporary Change <input type="checkbox"/> For Training Purposes <input type="checkbox"/> Alternate Work Schedule of 9-80s (i.e., work 8-9 hour days and 1-8 hour day with 1 day off every other week). With this alternate work schedule, the work week starts at 12 noon on Friday and ends at 11:59 a.m. Friday.							
Date	Employee Acknowledgement			Date	Supervisor's Signature		

The Public Records Act, RCW 42.17.250, et. Seq., requires disclosure of public records unless they are exempt. If requested, non-exempt public records in the possession of The Evergreen State College will be released. Exempt records will be withheld from public disclosure or exempt portions of records will be redacted from records prior to release.

Send copies to: Employee, Unit Timekeeper, Human Resource Services, and Payroll Office.