** Change of Work Hours Request**

 Summer 2017 Flexible Work Hours

**TO:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate Supervisor

**FROM:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee

**DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to request flexible work hours and change my work schedule for the specified period of time indicated below.

If approved, my work schedule would be:

Work Days: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**All schedules begin Sunday, May 28th and end on Saturday, August 19th, 2017**

I understand that if I am a non-exempt (hourly) employee the hours I work in excess of eight

(8) hours each day will be paid at my “regular” pay rate, not at an “overtime” pay rate. However,

any approved hours I may work in excess of forty (40) hours each work week will be paid at the overtime pay rate.

The signatures below indicates our agreement to change my work schedule with the full

understanding that should business conditions change during this time I may be required to

revert to my normal schedule with or without advance notice.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee/Date Supervisor/Date

[ ]  **Approved** [ ]  **Not Approved**

**Human Resources review:**

\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Initials Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President/Date

cc: Personnel File