

**Employee Work Schedule**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employee No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Effective Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office/Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please complete the schedule, obtain supervisor’s approval and forward to RFHR, 100C MSC, whenever your work schedule changes.**

Full Time Employees

* Standard Hours

Starting Time: \_\_\_\_\_\_\_\_\_\_ Meal Period: \_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_ Ending Time:\_\_\_\_\_\_\_\_\_\_\_

* Flex Time

Starting Range: \_\_\_\_\_\_\_\_\_\_\_to \_\_\_\_\_\_\_\_\_\_\_ Ending Range: \_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_

Indicate anticipated meal period: \_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_

Part Time Employees

% Effort (FTE) \_\_\_\_\_\_\_\_\_ Required # of Hours for FTE \_\_\_\_\_\_\_\_\_\_\_\_ □ Biweekly □ Hourly

|  |  |  |  |
| --- | --- | --- | --- |
|  | Starting Time | Ending Time | Meal Period |
| Saturday |  |  | \_\_\_\_\_\_to\_\_\_\_\_\_ |
| Sunday |  |  | \_\_\_\_\_\_to\_\_\_\_\_\_ |
| Monday |  |  |  |
| Tuesday |  |  |  |
| Wednesday |  |  |  |
| Thursday |  |  |  |
| Friday |  |  |  |

Comments:

I acknowledge that my supervisor has explained the Research Foundation attendance requirements to me and my schedule of working hours as indicated above.

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

Employee Signature Date

Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate Supervisor Date

Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PI/CO-PI Date