



Employee Name:	
Department:	
Supervisor Name:	

Employees please select one of the following options:

A. I am an employee working 35 hours per week and I choose to work the following schedule starting Monday, May 25, 2020 through Thursday, August 13, 2020 (excluding the week of Monday, June 29th as the college will be closed on Friday, July 3rd in observance of Independence Day):

With 1 hour for lunch

8:00 a. m. to 5:45 p.m.

8:30 a.m. to 6:15 p.m.

9:00 a.m. to 6:45 p.m.

Other hours: _____ (as approved by your supervisor).

With 30 minutes for lunch

8:00 a.m. to 5:15 p.m.

8:30 a.m. to 5:45 p.m.

9:00 a.m. to 6:15 p.m.

B. I am an employee working 30 hours per week and I choose to work the following schedule Monday, May 25, 2020 through Thursday, August 13, 2020 (excluding the week of Monday, June 29th as the college will be closed on Friday, July 3rd in observance of Independence Day):

With 1 hour for lunch

8:00 a. m. to 4:30 p.m.

8:30 a.m. to 5:00 p.m.

9:00 a.m. to 5:30 p.m.

Other hours: _____ (as approved by your supervisor).

With 30 minutes for lunch

8:00 a.m. to 4:00 p.m.

8:30 a.m. to 4:30 p.m.

9:00 a.m. to 5:00 p.m.

C. I am opting to keep my 30 or 35 hour regular work schedule from Monday, May 25, 2020 through Thursday, August 13, 2020 and I will charge my vacation, optional and/or free day time bank(s) one (1) day (.86 for employees eligible for shorter hours), on each of the College designated Friday closings, a total of twelve (12) Fridays.

Employees: After making your selection, please forward to your supervisor for processing.

Employee Signature : _____ Date: _____
(type in your full name)

Supervisor:

Supervisor's Approval: _____ Date: _____

All forms must be approved and on file with your supervisor by **August, 10, 2020**.
RETAIN ALL FORMS FOR YOUR RECORDS; HR WILL NOT BE COLLECTING THESE FORMS GOING FORWARD.