

Work Schedule Form

Effective October 28, 2024

Employee Name:					Pers. No.		
Office/Division/Bureau:							
Job Title:					Effective Date:	Effective date must start at the beginning of a pay period	
I am requesting the following work schedule (choose one) :							
Option 1: Five 8-Hr Days		Option 2: Four 10-Hr Days		Option 3: Four 9-Hr Days + one 4-Hr Day		Option 4: Other (Please describe)	
Week 1 of pay period	Monday <i>am-pm</i>	Tuesday <i>am-pm</i>	Wednesday <i>am-pm</i>	Thursday <i>am-pm</i>	Friday <i>am-pm</i>	Saturday <i>am-pm</i>	Sunday <i>am-pm</i>
T or O*							
Week 2 of pay period	Monday <i>am-pm</i>	Tuesday <i>am-pm</i>	Wednesday <i>am-pm</i>	Thursday <i>am-pm</i>	Friday <i>am-pm</i>	Saturday <i>am-pm</i>	Sunday <i>am-pm</i>
T or O*							
<i>The Fair Labor Standards Act (FLSA) requires Non-Exempt employees have a work schedule of 40 hours in a 7 day work week (Monday thru Sunday).</i>							
The following applies to employees participating in <i>Option 2</i>: <ul style="list-style-type: none">For a holiday work week, the employee will observe the day preceding or following the holiday as determined by the Appointing Authority when the holiday falls on their day off.							
The following applies to employees participating in <i>Option 3</i>: <ul style="list-style-type: none">When the holiday falls on their four (4)-hour work day, they will only be granted 4 hours of holiday leave on that day.							
In the event of an office closure, special leave will be granted in accordance with Civil Service rules if the office closure occurs on a scheduled work day.							
*Indicate T for Telework or O for Office.							
Employee Signature						Date	
<input type="checkbox"/>	Approved						
<input type="checkbox"/>	Disapproved						
			Appointing Authority/Designee Signature			Date	
For H. R. use only:							
Date entered in LaGov:				Entered By:			

****Timekeepers must keep a copy of this form in their records****