



**RYGIEL**

*Supports for Community Living*

## SCHEDULE CHANGE REQUEST

**Instructions:** Please ensure requests for changes to schedule are made a minimum of 7 days in advance and acknowledged by both employees. All changes must be approved by a Service Coordinator/Supervisor. Only one schedule change request per form. Please complete form clearly – incomplete request forms will not be approved. Please email completed form to [scheduling@rygiel.ca](mailto:scheduling@rygiel.ca)

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Employee Requesting Change Employee # \_\_\_\_\_

Employee: \_\_\_\_\_  
(print name)

Shift Exchange

Give Away

Vacation – Change

Other \_\_\_\_\_  
(e.g. Union day/Pay Back/Float Vacation)

### Explanation:

***The above request is mutually agreed upon with the following employee:***

Employee Accepting Change Employee # \_\_\_\_\_

Employee: \_\_\_\_\_  
(print name)

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### Office Use Only:

SC/Supervisor Approval: Yes \_\_\_ No \_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_

Paper Schedule Adjusted by SC/Supervisor: Yes \_\_\_ No \_\_\_

ComVida Schedule Adjusted by SC/Supervisor: Yes \_\_\_ No \_\_\_