

**USNH NBAJOBS WORK SCHEDULE REQUEST FORM**

Name (L,F,M): \_\_\_\_\_

USNH ID: \_\_\_\_\_

Position/Suffix: \_\_\_\_\_



Percent time the employee will work. \_\_\_\_\_ Is this change permanent?  Yes  No

Is this a change from the current percent time?  Yes  No

If yes, date permanent change made to position: \_\_\_\_\_

Dates during the FY the employee will work. \_\_\_\_\_

Begin Date: \_\_\_\_\_

End Date: \_\_\_\_\_

The total number of hours the employee will work during the FY : \_\_\_\_\_

Dates this work schedule is in effect; Start: \_\_\_\_\_

End: \_\_\_\_\_

Indicate the day of Week 1 or Week 2 that the work schedule begins \_\_\_\_\_

Provide the shift and number of hours for each day in Week 1 or Week 2

Week 1 Day	S	S	M	T	W	Th	F	Total Wk1 Hours
Shift								
Hours								

Week 2 Day	S	S	M	T	W	Th	F	Total WK2 Hours
Shift								
Hours								

If a second work schedule is needed:

Dates this work schedule is in effect; Start: \_\_\_\_\_

End: \_\_\_\_\_

Indicate the day in Week 1 or Week 2 that the work schedule begins. \_\_\_\_\_

Week 1 Day	S	S	M	T	W	Th	F	Total Wk1 Hours
Shift								
Hours								

Week 2 Day	S	S	M	T	W	Th	F	Total Wk2 Hours
Shift								
Hours								

Notes/Explanation: \_\_\_\_\_

Entered by Payroll: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Year: \_\_\_\_\_

Pay ID (B1/B2): \_\_\_\_\_

Payroll Number: \_\_\_\_\_