Availability Form

Name: _____   **Date:** _____

Department:

Circle One: 20hr+   30hr+   OPEN

Employment Status: ☐ New Hire   ☐ Current

Fill in the Chart below indicating all times. If you are available to work all day, draw an X in "Available to work" and vice versa if you can not work. Only give a reason for days you are not available.

Effective Date: ____/____/_____   **School Attending:** _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Available to work							
Can Not Work							
Reason							

* Management reserves the right to request proof of any reason.
* Special considerations for adjusted start/end times must be accompanied by explanation.
* Blocks of time requested as "Can Not Work" will only be approved with a valid reason.

Schedule Notes:

_____

_____

By signing this document, I hereby agree that these scheduling preferences are valid for the foreseeable future and that I have read and understand all notations mentioned above.Changes are all subject to approval by management.

Sign: _____   **Date:** _____

*Office Use Only: Inputted by _____ on _____