

2024 SUMMER SCHEDULE FORM

Name: _____

My normal weekly work schedule is _____ hours. I request that I be placed on the summer schedule indicated below. Please do your best to stick to the schedule you identify on this form.

The sum of "Total Hours Working" and "Total Hours Leave" must equal your normal weekly work schedule. If applicable, complete leave requests in the [Employee Self-Service](#). Remember personal days must be used as full days and can't be split between days. Personal days are equal to the number of hours for the day you are scheduled to use it. If needed, attach additional schedule information.

Return form to Human Resources via email at hr@lowercolumbia.edu.

DAY	TIME	HOURS WORKING	HOURS LEAVE (Paid or Unpaid)
MONDAY	_____	_____	_____
TUESDAY	_____	_____	_____
WEDNESDAY	_____	_____	_____
THURSDAY	_____	_____	_____
*If your request includes hours worked on Friday, please include the reason for the request and the proposed work to be performed.			
TOTAL HOURS WORKING		_____	
TOTAL HOURS LEAVE			_____

Employee Signature	Date
Supervisor Signature	Date
Vice President Signature	Date
Human Resources Signature	Date

PAYROLL USE ONLY:

ABSENCE REQUESTS SUBMITTED:

Week of 6/17: _____	Week of 6/24: _____	Week of 7/1: _____	Week of 7/8: _____
Week of 7/15: _____	Week of 7/22: _____	Week of 7/29: _____	Week of 8/5: _____
Week of 8/12: _____	Week of 8/19: _____	Week of 8/26: _____	