Work Schedu	le and	Approver	Form
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Employee Name:			Empl ID:			Empl Rcd#:		
Business Unit:			Department:					
Effective Date: mm/dd/yyyy Original Schedu						This is an alternative work schedule request.		
Tit l e		Coordinator / Approv	er Name				Empl ID	
Payroll Coor	dinator							
Payroll Coor	dinator (2)							
Payroll Coor	dinator (3)							
UW Approve	er							
UW Approve	er Back-up							
Non-UW App	orover							
Non-UW Apı	orover Back-up							
	(2) a Punch Scho	edule (Non Exempt FLS	lule (Non Exempt FLSA), or (3) a Punch Schedule (One IN, One OUT) with Elapsed Schedule Punch Schedule 2				n Auto Lunch Deduct Ai	mount.
	Day	Work Hours ¹	IN	OUT	IN	OUT	Deduct Amount ³	
	Sunday							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Saturday							
	Week 2	Elapsed Schedule		Punch Schedule ²			Auto Lunch	
	Day	Work Hours ¹	IN	OUT	IN	OUT	Deduct Amount ³	
	Sunday							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Saturday							
Supervisor N	please use a sep	ne work schedule varies parate sheet to describe			edule exceeds	this two w	eek template, Date: mm/dd/yy	ууу