**Request for a Temporary Modified Work Schedule**

**Due to Childcare Needs Resulting from K-12 Closure (April 29 – End of the Academic Year)**

**(Version 3.0 – March 19, 2020)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and Job Title:** |  | | **Department:** |  |
| **Direct Supervisor:** |  | | **Today’s Date:** |  |
| What is your normal/regular work schedule | |  | | |
| What do you consider the most essential functions of your role? | |  | | |

Detail the anticipated dates and the times below where you are requesting a temporary modified work schedule. Modifications may include: (1) Use accrued leave for full or partial leave; (2) Adopt a temporary flexible schedule; (3) Early morning/evening or weekend work – It is possible that some work time could be made up before or after regular work hours and/or over the weekend, especially for those who may have significant work with deadlines or those without sufficient accrued leave; (4) Work from home; (5) a combination of the above options.

|  |  |  |
| --- | --- | --- |
| **Date** | **EMPLOYEE REQUEST: Explain availability and your proposed temporary modified work schedule. If you can work your regular schedule on any given day, please write “normal day”** | **AGREEMENT: Supervisor comments (approve request, deny, agree to modification, additional discussion needed\*) \*contact your supervisor and/or discuss with OHR** |
| April 29 |  |  |
| April 30 |  |  |
| May 1 |  |  |
|  | **Modified Work Week** |  |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday (if applicable) |  |  |
| Sunday (if applicable |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Additional comments or requests:** |  |

Employees and managers may collectively or individually seek additional assistance through the chain of supervision and/or by contacting the Office of Human Resources (OHR). The signatures below represent an agreement on the temporary work schedule outlined in the Agreement column above. If some dates require additional conversation, this form may be modified and updated, as needed. If circumstances change after the initial agreement is made, the employee should alert their manager as soon as possible to attempt to find another solution to any scheduling challenges.

**By requesting and agreeing to a modified work schedule, hourly employees are voluntarily waiving their rights to overtime within a calendar day (they would still be eligible for overtime earned within any given workweek) or any shift differential.**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Employee Signature & Date |  | Supervisor Signature & Date |

Managers: retain the original form and email a copy (and any subsequent updates or modifications) to OHR at [oithr@oit.edu](mailto:oithr@oit.edu).