

Shift Change Request Form

Purpose

This form is to be used whenever an employee is requesting to change shifts.

Procedure

- a. Requests for change will not be approved for the sole purpose of extending scheduled days off and such requests may result in disciplinary action.
 - b. Schedule change requests must not result in an employee working in excess of 16 consecutive hours.
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Employee Name: _____ **Date:** _____

Current Shift: _____ **Requested Shift:** _____

Reason for Shift Change:

- School
- Scheduling Conflicts
- Babysitting Issues
- Personal

Other: _____

Approval/Denial

- Approved
- Denied

Supervisor: _____ Date: _____

Manager: _____ Date: _____

Date of Change: _____