

Restaurant Schedule Form Template Word

Restaurant Name: _____

Location: _____

Date of Schedule: _____

EMPLOYEE SHIFT INFORMATION

Manager on Duty: _____

Shift Leader: _____

- Shift Types: Breakfast Lunch Dinner
- Overtime: Approved Not Approved
- Break Schedule: 30 Min 1 Hour

WORK SCHEDULE TABLE

Employee Name	Job Role	Work Hours	Notes

EMPLOYEE ACKNOWLEDGEMENT

- **Employees must follow shift guidelines strictly.**
- **All shift changes must be approved by management.**
- **Failure to follow the schedule may result in disciplinary action.**

Manager's Signature: _____ **Date:** _____

Employee's Signature: _____ **Date:** _____