

Temporary 2024 Summer Schedule Form

Employee Name: _____ Employee # _____

Department: _____

Employee's weekly summer schedule hours:

Weekly Total Hours: _____ (Hours worked MAY NOT include lunch)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
IN							
OUT							
LUNCH							
HOURS WORKED							

Employee's weekly regular schedule hours (before June 3 and after August 17, 2024)

Weekly Total Hours: _____ (Hours worked MAY NOT include lunch)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
IN							
OUT							
LUNCH							
HOURS WORKED							

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____