

EMPLOYEE SCHEDULE

Employee Schedule

Employee Name: _____

Start Date: _____, 20____.

Days/Hours of Employment: The employee shall work the following schedule:

Sunday _____ to _____ _____ to _____

Monday _____ to _____ _____ to _____

Tuesday _____ to _____ _____ to _____

Wednesday _____ to _____ _____ to _____

Thursday _____ to _____ _____ to _____

Friday _____ to _____ _____ to _____

Saturday _____ to _____ _____ to _____

Total hours / week _____

Absences/Tardiness: In the event the employee is unable to work at a scheduled time due to illness or other legitimate reason, employee shall give Employer _____ hours advance notice. In case of an emergency or tardiness, employee shall notify Employer as soon as possible.

Scheduled Holidays Employee will not be expected to work:

Number of Vacation Days with Pay: _____ Number of Vacation Days without Pay: _____

Number of Sick Days with Pay: _____ Number of Holiday Days with Pay: _____

Holiday Pay Rate: (specify holidays):