

CLERK OF THE COURT WORK SCHEDULE AGREEMENT

| | | |
|--|--|-------------------|
| Employee's Name | Division | Employee's I.D. # |
| <input type="checkbox"/> Exempt <input type="checkbox"/> Non-exempt | MUST BE RECEIVED BY CLERK OF COURT HUMAN RESOURCES NO LATER THAN ONE PAY PERIOD BEFORE EFFECTIVE DATE | |

My work schedule is Monday through Friday, from _____ a.m. to _____ p.m., with a _____ minute lunch.

If you do NOT work a regular Monday – Friday, please fill out the alternative schedule below.

| WEEK 1 OF PAY PERIOD | | | | | (NON-PAYDAY WEEK) |
|-------------------------------|---------|------------------|----------------|----------|---------------------|
| FOR ALTERNATIVE SCHEDULE ONLY | | | | | |
| DAY | TIME IN | LUNCH START TIME | LUNCH END TIME | TIME OUT | DAILY HOURLY TOTALS |
| MONDAY | | | | | |
| TUESDAY | | | | | |
| WEDNESDAY | | | | | |
| THURSDAY | | | | | |
| FRIDAY | | | | | |
| SATURDAY | | | | | |
| SUNDAY | | | | | |
| TOTAL HOURS WEEK 1 | | | | | |

| WEEK 2 OF PAY PERIOD | | | | | (PAYDAY WEEK) |
|-------------------------------|---------|------------------|----------------|----------|---------------------|
| FOR ALTERNATIVE SCHEDULE ONLY | | | | | |
| DAY | TIME IN | LUNCH START TIME | LUNCH END TIME | TIME OUT | DAILY HOURLY TOTALS |
| MONDAY | | | | | |
| TUESDAY | | | | | |
| WEDNESDAY | | | | | |
| THURSDAY | | | | | |
| FRIDAY | | | | | |
| SATURDAY | | | | | |
| SUNDAY | | | | | |
| TOTAL HOURS WEEK 2 | | | | | |

| | |
|--|------|
| <p style="background-color: yellow;">I understand this schedule will be revisited periodically and will change based on business need.</p> <p>EMPLOYEE'S SIGNATURE _____</p> | DATE |
| <p><input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED Effective date of work schedule: _____ (Date must be beginning of pay period)</p> <p>SUPERVISOR'S SIGNATURE _____</p> | DATE |