

Work Schedule/Shift Change Notice

Last name First name Middle name or initial

Personnel number Position title Division Unit

Holiday conversion to 5/8 schedule? Position overtime eligible Work week

Yes No Yes No

New Work Schedule Rule (Required, see page 2) Schedule start date (current or future pay cycle)

No schedule match, this is best fit*

First date off — if a change to a two week 9/80 schedule Telework (If Yes, Telework Schedule Code is required, see page 2)

Yes No Telework Schedule Code:

Please Note:

- Changes with a schedule start date prior to the current pay cycle will be entered with a date in the current pay cycle.
- Work schedule rules cannot be changed if there are future leave entries posted in MyPortal on/after the schedule start date. If there is future leave in MyPortal, it will need to be deleted before the new work schedule rule can be keyed. If not deleted prior to submitting the work schedule, processing will be delayed.

Old schedule/shift Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Week 1

Week 2 (9/80 only)

New schedule/shift Sunday Monday Tuesday Wednesday Thursday Friday Saturday Employee lunch break

Week 1 Start End

Week 2 (9/80 only)

Program needs for schedule/shift change/reason for change (not required if new schedule was mutually agreed to)

Check all that apply.

Supervisor's Notice to Employee Employee's Request to Supervisor Mutually Agreed Change

Permanent Change Temporary Change For Training Purposes Yes No

! If this Work Schedule/Shift Change Notice affects your telework agreement in any way, you must submit a new **HCA Telework Agreement**.

Employee signature Date Supervisor signature Date
Comments

Send the signed copy (employee and supervisor signatures) to Human Resources at HRMB@hca.wa.gov

* Best fit: If the work schedule is not listed on page 2, choose the 'best fit' – a schedule must be identified. If a "best fit" is chosen, a work schedule substitution reflecting the actual work schedule will be required.