Appendix C

Indian Affairs Flexitime (Gliding Schedule) Work Schedule Agreement

Employee Name:

Position Title/Series/Grade:

_____ I would like to work Flexitime. My flexible arrival time band would be from ______ a.m. to ______ a.m., and my flexible departure time band would be from ______ p.m. to ______ p.m. I understand that I may not arrive earlier than the beginning of the arrival band nor depart later than the end of the departure band. I may take a flexible lunch with my supervisor's approval between the hours of ______ a.m. and ______ p.m. Core hours are 9:00 a.m. to 3:30 p.m. on Monday through Friday.

I understand that I am required to be present at work on each of the ten workdays of the pay period and during core time as indicated above, or I must account for my absence with compensatory time off, credit hours or the appropriate leave or other excused absence.

I have read, understand and agree to all the provisions of the Indian Affairs AWS policy that are applicable to the work schedule I have requested.

I understand that Flexitime is a privilege and as such I have no inherent right to a Flexitime schedule and that the approval of my Flexitime request is at the sole discretion of my supervisor.

I understand that I may be requested to arrive at an alternative or a specific time on occasion, when necessary to provide office coverage, attend meetings, training, or conferences and that when requested I must comply.

I understand that I will not be paid for work in excess of eight hours on any workday unless I am authorized and approved to perform credit hours, or ordered to work overtime.

Employee Signature:	Date:
Approved	Not approved
Supervisor Signature:	Date:
Second Level Supervisor Concurrence: (Only for "Not approved" and the reason mus	

You may attach the explanation to this agreement.)