

## ALTERNATE WORK SCHEDULE AGREEMENT

EMPLOYEE'S NAME		TYPE OF AWS REQUESTED <input type="checkbox"/> 9/80 <input type="checkbox"/> 4/40 <input type="checkbox"/> 3/36	
CLIENT NAME		SITE LOCATION	
WORK WEEK WILL BEGIN AT mid-shift    every Friday			EFFECTIVE DATE

In accordance with the Fair Labor Standard's Act ("FLSA"), I hereby agree that I will work the above Alternate Work Schedule. I am voluntarily requesting and agreeing to the following terms and conditions of this agreement:

*I understand that this change in work week is voluntary; it not a right and may be changed or canceled by the Employer at any time. I agree to abide by Employer's 3/36, 4/40 or 9/80 alternate work schedule policy and procedures.*

*I understand that I will not accrue overtime solely as a result of my Alternate Work Schedule and that overtime requires prior approval of my immediate supervisor. I will work the scheduled hours at a standard rate of pay, and not receive overtime pay (typically at one-and-a-half times) my standard rate until hours worked on that shift have exceeded the already scheduled hours.*

*If I work in a state which has a state required double-time pay obligation I will only be eligible for double-time pay if I reach state required minimum hours on any given shift or on the seven day (if required under state law), at which point double-time will be paid at twice the standard rate for those hours after the required minimum hours or any hours worked on that seventh day. (For example after 12 hours per day in California).*

*I understand that my alternate work schedule will be canceled during the period of time that I am serving Jury Duty, or disabled due to a work-related or non-industrial disability leave.*

*I agree that should a holiday fall on a day I am scheduled to work, I understand that I may still be required to work that day. I further agree that if I do not work that holiday then I will not be paid for that holiday unless informed by the Human Resource department in writing and in addition if I am on a temporary assignment only if Employer's Client agrees to pay for such time.*

EMPLOYEE'S SIGNATURE 	DATE
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