

EMPLOYEE SCHEDULE

MINORS - Under 18

LOCATION: _____

DEPARTMENT: _____

WEEK OF: ____/____/____ - ____/____/____



Employee Name	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Total Hours
Bob Jenks	Day Off	4:30 - 8:30	7:30 - 4:00 11:00 - 11:30	7:30 - 4:00 11:30 - 12:00	Day Off	Day Off	4:30 - 8:30	24
Tyler Crowley	4:30 - 8:30	Day Off	7:30 - 4:00 11:30 - 12:00	7:30 - 4:00 11:00 - 11:30	4:30 - 8:30	Day Off	Day Off	24
Nina Anatriello	4:30 - 8:30	Day Off	8:00 - 4:30 12:00 - 12:30	8:00 - 4:30 12:30 - 1:00	4:30 - 8:30	4:30 - 8:30	Day Off	28
Ed Sickles <i>Minor</i>	Day Off	4:30 - 8:30	9:00 - 4:30 12:30 - 1:00	9:00 - 5:00 12:00 - 12:30	4:30 - 8:30	Day Off	4:30 - 8:30	26.5
Maya Parker	Day Off	Day Off	9:00 - 4:30 12:00 - 12:30	8:30 - 5:00 1:00 - 1:30	Day Off	Day Off	Day Off	15
Rachael Kroskey	Day Off	4:30 - 7:30	4:30 - 7:30	9:00 - 5:00 1:30 - 2:00	Day Off	4:30 - 7:30	Day Off	16.5
Nick Christiano	4:30 - 8:30	4:30 - 8:30	4:30 - 8:30	Day Off	Day Off	Day Off	4:30 - 8:30	16
Zachary Blue <i>Minor</i>	4:30 - 7:30	Day Off	4:30 - 7:30	Day Off	4:30 - 7:30	Day Off	4:30 - 7:30	12

Any changes to the schedule **MUST** be:
 1. Noted in the "changes" box; **AND**
 2. Initiated by the employee.

CSC - Called Schedule Change
SH - Sent Home Involuntary
VLE - Voluntary Leave Early
U - Unexcused Absence
I - Illness/Injury
V - Vacation
H - Holiday