

**ASSIGNMENT to ALTERNATE WORK SCHEDULE**  
**Pursuant to Appendix D**  
of the  
**BARGAINING AGREEMENT**  
between the  
**STATE OF ALASKA**  
and the  
**Alaska Public Employees Association/AFT**  
**representing the Supervisory Unit**

**Department/Division:** \_\_\_\_\_ **Duty Station:** \_\_\_\_\_

It is agreed between the parties that the provisions of Appendix D, the Alternate Workweek Master Agreement, Schedule 2, shall apply to the following bargaining unit member:

PCN	Employee Name	Employee ID#	Job Classification

The work schedule shall consist of four consecutive days within the defined workweek which begins on Sunday at midnight and ends the following Sunday at midnight. No single day may be scheduled to exceed ten (10) hours.

The regularly scheduled days and hours are as follows:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
							<b>37.5</b>

Management reserves the right to alter this schedule, when necessary, to meet the business needs of the workplace with consideration of the employee's needs, in accordance with the collective bargaining agreement.

This assignment shall be effective on Monday, \_\_\_\_\_ and shall remain in effect through \_\_\_\_\_ (no later than June 30, 2018). Either party may cancel upon fifteen calendar (15) days written notice, with concurrent notice to the Payroll Services Manager. In the event of cancellation, the affected employee shall return to a normal work schedule in the first week following the required notice period.

**APPROVALS:**

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

cc: DOP&LR Payroll Services (via email scan or facsimile)  
APEA/AFT (via email scan or facsimile)