

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.

The regularly scheduled days and hours are as follows:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
							40

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, 2021). 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)