Alaska Department of Administration

<u> </u>	ential Employees Association (CEA) Bargaining Unit
Name: Start Date:	Employee ID: End Date:
	e need for this employee to work excessive hours:
employee has worked a work week in ex	earned, the employee must work in excess of 45 hours. When the excess of 45 hours, s/he will be provided with Flex Time in 0.2 yer 42 hours. Periods of time less than 0.25 hour will only be excepted (200) hours.
I agree to and understand	
-	Date:
Bargaining Unit Agreement for Flex Tinterms and conditions contained in Article 7, and sign this agreement before the employe maintain all records required to document	and agree to abide by the conditions set forth in the CEA me Plans. The parties affirm that they have not changed the 14 of the CEA Unit Agreement. The parties agree to execute the starts work under this Flex Time Plan. The parties agree to and report the employee's regular work hours, extraordinarths, and the accumulation and use of Flex Time as set forth be
Employee's Signature	Date
Supervisor's Signature	Date
Director's Signature	Date