

CONTINENTAL SECRET SERVICE BUREAU, INC
Schedule Switch Shift Request

Any person requesting to switch a shift with another person for a shift and/or a day must switch within the same week. This switch must be requested in advance, approved and scheduled only by site supervisor and/or scheduling manager and shall not create overtime for either party.

ORIGINAL SCHEDULE		
Name of person Requesting Switch	Date of Schedule	Time of Schedule

Must be completed by the person requesting the switch

Replacement Schedule		
Name of person Working Switch	Date of Schedule	Time of Schedule

Must be completed by the Site Supervisor and/or Scheduling Manager

New Shift Schedule		
Name of person Working	Date Scheduled to Work	Time Scheduled to Work

Must be completed by the Site Supervisor and/or Scheduling Manager

I acknowledge that I am aware of the change to my work schedule which is noted above. I am also aware that if I do not work the said change above, I will be in violation of the attendance policy.

 Signature of person requesting the change

 Signature of person accepting the change

 Date

 Signature of Site Supervisor and/or Scheduling Manager

Approved ____ Unapproved ____