

**NORTHWESTERN STATE UNIVERSITY  
WORK SCHEDULE FORM**

All university employees, excluding nine (9) month faculty, graduate assistants, adjunct instructors, lecturers, and student employees shall file with the University, on this form, their assigned work schedule, certifying their work schedule and understanding of all Rules, Regulations, University Policies, etc., addressing requirements of their time and attendance reporting. Nine (9) month faculty, graduate assistants, adjunct instructors, lecturers, and student employees are assigned workloads in accordance with applicable University policy and procedures. Assignments are required to be on file in the employee's respective budget unit offices and other offices as required by University policy and procedures.

I, \_\_\_\_\_, have been assigned the following Standard Work Schedule, effective \_\_\_\_\_ as indicated below.  
(Print or Type Employee Name) (Date)

Employee ID#: \_\_\_\_\_

**Assigned Schedule**

**Standard Work Schedules\***

- \_\_\_\_\_ 1) 8:00 a.m. to 12 noon and 12:30 p.m. to 4:30 p.m. Monday through Friday with 30-minute lunch period.
- \_\_\_\_\_ 2) 8:00 a.m. to 12 noon and 1:00 p.m. to 5:00 p.m. Monday through Friday with 60-minute lunch period.
- \_\_\_\_\_ 3) 7:30 a.m. to 12 noon and 1:00 p.m. to 4:30 p.m. Monday through Friday with 60-minute lunch period.
- \_\_\_\_\_ 4) 7:30 a.m. to 12 noon and 12:30 p.m. to 5:00 p.m. Monday through Thursday with 30-minute lunch period, and 8:00 a.m. to 12 noon on Friday
- \_\_\_\_\_ 5) 7:00 a.m. to 12 noon and 12:30 p.m. to 4:30 p.m. Monday through Thursday with 30-minute lunch period, and 8:00a.m. to 12 noon on Friday
- \_\_\_\_\_ 6) Other: Work Begin Time: \_\_\_\_\_ Work End Time: \_\_\_\_\_  
Lunch period: \_\_\_\_\_

\*These schedules do not preclude your supervisor making assignments for you to accommodate office hours or other assignments on a rotating basis as may be required for the efficient operation of the University.

\*If schedule assigned is not a Standard Work Schedule (1-5), it must be justified and approved through proper routing and have the appropriate Vice-President's approval before becoming effective. Fifteen-minute intervals for begin times, lunch periods, and end times may be arranged to effect work schedules as an extension of standard work schedules without justification.

Justification: \_\_\_\_\_  
\_\_\_\_\_

Furthermore, I acknowledge that once an assignment is made, I am required to work the assigned schedule until a change is approved through proper routing and authorization. I understand that my assigned schedule is not a daily, flexible schedule. Any deviations in my assigned work schedule are required to be approved. Leave requests for any hours of work missed and/or leave taken and overtime and/or compensatory time, require approved requests in accordance with all applicable policies, procedures, and directives. These are to be submitted with my time sheet.

For each workday, a minimum 30 minute "lunch period" must be scheduled. Any exception, e.g., Police Officers, must be approved by the Director of Human Resources.

I understand that any request for use of annual leave or compensatory leave shall be approved by my supervisor prior to taking of such leave and that any request for overtime and/or compensatory time worked shall have the approval of my supervisor prior to performing the work. I understand that Rest Periods are "work time". Rest Periods (breaks) are established by the University to provide the employee a period of relaxation and the break schedule assigned should not interfere with my assigned department's normal operations and may be adjusted by my supervisor. No rest period shall exceed 15 minutes. Rest period time may not be added to lunch periods or to other off-duty time, may not be used to attend class or for leave (employee cannot leave the campus to tend to personal business while on a rest period), and may not be accumulated to provide for a prolonged off-time period.

I understand that a copy of my work schedule will be maintained on file for internal and external auditor review and that changes in my work schedule require appropriate approval.

ACKNOWLEDGED: \_\_\_\_\_  
(Employee signature) Date

**ASSIGNMENT, APPROVALS, ROUTING**

Budget Unit Title: \_\_\_\_\_

Index: \_\_\_\_\_

\_\_\_\_\_  
Supervisor Date

\_\_\_\_\_  
Dean Date

\_\_\_\_\_  
Budget Unit Head Date

\_\_\_\_\_  
President, Vice-President or Equivalent Date