



# RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER

RANCHO LOS AMIGOS  
NATIONAL REHABILITATION CENTER

Occupational Therapy (OT) and Recreation Therapy (RT) Department

<b>SUBJECT:</b> Change in Work Week Schedule Request Form Holiday, Saturday, Sunday and/or RDO	<b>Policy No.:</b> 203 - Attachment A
	<b>Revised:</b> 2022
	<b>Supersedes:</b> Jan. 2020
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## CHANGE IN WORK WEEK SCHEDULE REQUEST FORM HOLIDAY, SATURDAY, SUNDAY AND/OR RDO

Employee Name: \_\_\_\_\_ Employee No. \_\_\_\_\_

Week of: \_\_\_\_\_ Treatment Area: \_\_\_\_\_

### CHANGE IN SATURDAY AND RDO WORK SCHEDULE

I have been asked to work an eight (8) hour day on Saturday and take another day off during the week. I have willingly agreed with this schedule change. Enter the date(s) scheduled to work and the hour(s) directly under the date, **mark an X indicating your Regular Day off (RDO) for this week only.**

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Date(s):							
Work Schedule							

Covering on Saturday: \_\_\_\_\_  
Enter date

Covering for: \_\_\_\_\_  
Print Employee Name

Change Saturday from: \_\_\_\_\_ to \_\_\_\_\_  
Enter date Enter Date

Switching with: \_\_\_\_\_  
Print Employee Name

Change RDO from: \_\_\_\_\_ to \_\_\_\_\_  
Enter date Enter Date

Submitted by: \_\_\_\_\_  
Print Employee Name

Date: \_\_\_\_\_  
Month/Date/Year

Approved by: \_\_\_\_\_  
Print Supervisor/Manager Name

Date: \_\_\_\_\_  
Month/Date/Year

### CHANGE IN HOLIDAY AND SUNDAY WORK SCHEDULE

Covering for: \_\_\_\_\_  
Print Employee Name

Holiday / Saturday \_\_\_\_\_  
Circle One Enter Coverage Date

Change Holiday from: \_\_\_\_\_ to \_\_\_\_\_  
Enter date Enter Date

Switching with: \_\_\_\_\_  
Print Employee Name

Change Sunday from: \_\_\_\_\_ to \_\_\_\_\_  
Enter date Enter Date

Switching with: \_\_\_\_\_  
Print Employee Name

Submitted by: \_\_\_\_\_  
Print Employee Name

Date: \_\_\_\_\_  
Month/Date/Year

Approved by: \_\_\_\_\_  
Print Supervisor/Manager Name

Date: \_\_\_\_\_  
Month/Date/Year