

# City of Pittsburgh



## Flexible Work Schedule Request for Non-Union Employees

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Department: \_\_\_\_\_

Requested flexible working schedule:

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday
Start Time					
Quit Time					

Total hours worked for week: \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday
Start Time					
Quit Time					

Total hours worked for week: \_\_\_\_\_

Total hours worked for pay period: \_\_\_\_\_

Briefly describe the reason for this request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employee Signature: \_\_\_\_\_

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- Approved  
 Denied

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Director's Signature \_\_\_\_\_ Date: \_\_\_\_\_