

Ventura County Human Resources and Payroll

Schedule/Change Request Form

Employee ID: _____ **Employee Name:** _____

Effective Date of Schedule Change: _____ FLSA Status: _____
 Department: _____ Union Code: _____
 Job Code/Description: _____ Standard Hrs: _____
 Work Day Hours: _____ Day Off: _____

Schedule Description (if known): _____

Complete schedule details below:

WEEK 1							WEEK 2						
SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT

TASKING INFORMATION (If Applicable)

Project	Activity	Function	Reporting Category

Employee Signature: _____ Date: _____

Department HR/Payroll Representative Signature: _____ Date: _____

FOR AUDITOR PAYROLL USE ONLY

Verify the following information on Job Data: Work Day Hours: _____ Paygroup: _____

Schedule ID: _____ Workgroup: _____

Task Group: _____ Task Profile: _____

Auditor Representative Signature: _____ Date: _____

Instructions for completing Schedule/Change Request Form

Effective Date of Schedule Change	Must be the first day (Sunday) of a pay period except for new hires.
FLSA Status	Either Professional or Non-exempt.
Department	Department number and name
Union Code	Union Code associated with the employee's Job Code
Job Code/Description	Job Code number and description.
Standard Hours	Total hours scheduled to work in two-week pay period
Work Day Hours	For full-time employees either 8, 9, 10, or 12 depending on schedule For part-time employees enter Standard Hours divided by 10
Day Off	Scheduled day off for 9/80 or 4/10 schedule
Schedule Description	From the Schedule Calendar Table
Schedule Details	Put scheduled hours for each day of bi-week period

Tasking Information---Applies to Task Reporters only

Project
Activity
Function
Reporting Category