Employee Availability Form



(Replace with your logo)

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

* Full-time
* Part-time
* Other
* This form is submitted to change the availability

*Enter preferred, on-call and unavailable hours.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
|  |  |  |  |  |  |  |
| Preferred | Preferred | Preferred | Preferred | Preferred | Preferred | Preferred |
|  |  |  |  |  |  |  |
| On-call | On-call | On-call | On-call | On-call | On-call | On-call |
|  |  |  |  |  |  |  |
| Unavailable | Unavailable | Unavailable | Unavailable | Unavailable | Unavailable | Unavailable |

Additional Comments/Further explanation:

|  |
| --- |
|  |

**Employee Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Manager Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**