Print Form

City of Gaithersburg
Request for Alternative Work Schedule

ACTION REQUESTED: ☐ New ☐ Change ☐ Cancellation

Please use guidelines on reverse side when making your request.

EMPLOYEE NAME: _____

I request that I be permitted to work the alternative schedule below beginning: _____

I am: ☐ Exempt (not eligible for overtime) ☐ Non-Exempt (eligible for overtime)

Day	Week 1		Total Hours Week 1			Week 2 (Completed if different from Week 1)		Total Hours Week 2		
Sunday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
Monday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
Tuesday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
Wednesday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
Thursday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
Friday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
Saturday	Arrive	Depart	Lunch	No Lunch	Total Hours	Arrive	Depart	Lunch	No Lunch	Total Hours
			☐	☐				☐	☐	
TOTAL HOURS WORKED						TOTAL HOURS WORKED				

I believe that my work can be completed within the above schedule with no loss of customer service or disruption to others in my department. I understand that my supervisor may require me at any time for any reason to return to the regular City established hours of operation or the business/operating hours of the facility. I agree to do so upon request. I understand that if my alternative schedule request is approved, I may not change my schedule without prior approval. I further understand that my alternative work schedule may be altered or rescinded, temporarily or permanently, at the discretion of my Department Head.

EMPLOYEE'S SIGNATURE: _____ **DATE:** _____

IMMEDIATE SUPERVISOR'S RECOMMENDATION

The employee and the supervisor have discussed this alternative work schedule request. At this time the request is:

☐ Recommended for approval

☐ Recommended for disapproval (state reason) _____

SUPERVISOR'S SIGNATURE: _____ **DATE:** _____

TO BE COMPLETED BY DEPARTMENT HEAD

☐ APPROVED ☐ DENIED

DEPARTMENT HEAD'S SIGNATURE: _____ **DATE:** _____

Forward original form to Human Resources.

City of Gaithersburg
Alternative Work Schedule Guidelines

- The City's established business hours are 8 a.m. to 5 p.m., Monday through Friday. (The business/operating hours of some City facilities may vary, as authorized by the City Manager.) Appropriate coverage and all regular departmental functions must be maintained during the City/facility established business hours.

- A flex-time work schedule is defined as working the required number of hours in a weekly (40) or biweekly (80) schedule, but with hours or workdays that vary from the City/facility established business hours.

- A compressed work schedule is defined as working extra hours on a regularly scheduled work day so that the weekly or biweekly schedule is completed in fewer days.

- **Non-exempt** employees may request an alternative work schedule that covers the workweek only (due to FLSA requirements). Non-exempt employees may not exceed 40 work hours per workweek without receiving overtime or compensatory leave.

- **Exempt** employees may request an alternative work schedule that covers the workweek or the pay period. Alternative work schedules for exempt employees are not bound by FLSA overtime and compensatory leave provisions.

- Unless an alternative work schedule has been approved, an employee's normal work schedule follows the City/facility established business hours. A normal workweek for all classified employees and unclassified management employees is 40 hours.

- Any classified employee or unclassified management employee may request an alternative work schedule by completing the Request for Alternative Work Schedule Form. However, there is no guarantee that an employee will be permitted to work an alternative work schedule.

- The employee's supervisor must recommend approval of the request for alternative work schedule and final approval must be made by the employee's Department Head. The Department Head's final decision may not be appealed. All approved or denied requests must be sent to Human Resources; the original Form will be retained in the employee's personnel file and a copy will be forwarded to Finance & Administration for payroll purposes.

- Once approved, an employee may not change his/her alternative work schedule without prior approval. The alternative work schedule may be altered or rescinded, temporarily or permanently, at the discretion of the Department Head.

- An employee on an alternative work schedule who desires to take leave must take the amount of leave consistent with his/her approved alternative schedule.

Temporary Schedule Adjustment

- Professional, administrative, and management personnel will occasionally have to work extra hours to accomplish their jobs. The supervisor has the authority to occasionally adjust an employee's hours within a pay period to allow an employee time off one day to offset required extra hours on another day. An employee does not have to complete an Alternative Work Schedule Form for a temporary schedule adjustment.