

BARBOUR COUNTY SCHOOLS

School _____

SERVICE PERSONNEL

2013-2014

REQUEST TO RESCHEDULE - - April 4, 2014

Employee Name:	
Department:	

RESCHEDULED

Date	Time In	Time Out	Extra Minutes Worked	Duties To Be Performed:

I hereby knowingly agree and consent to work on the date(s) shown above and perform the duties as listed. This work will be in lieu of the Parent-Teacher day which is scheduled for April 4, 2014. I understand that this is in lieu of time and overtime cannot be earned as a result of working the rescheduled time.

_____ Employee's Signature	_____ Date
_____ Supervisor's Signature	_____ Date