

Form OIG-HR-2b (03/19/04)

U.S. Department of Commerce
Office of Inspector General
Washington, D.C. 20230

ALTERNATIVE WORK SCHEDULE APPROVAL FORM



Supervisors must document their approval of their employees' work schedules on this form. Copies of the signed work schedule approval forms are to be provided to employees' timekeepers for inclusion in their time and attendance folders. A new, signed approval form is required each time an employee changes his or her work schedule.

Under both AWS options, there are core hours on each day of the workweek and flexible time bands at the beginning and end of the workday. Employees are expected to be present during core hours unless they are on approved leave or credit hours. Core hours are 9:30 a.m. to 3:30 p.m. for employees GS-14 and below, and 9:30 a.m. to 4:00 p.m. for GS-15 employees. Flexible time bands are 7:00 to 9:30 a.m. and 3:30 to 6:30 p.m. for employees GS-14 and below, and 7:00 to 9:30 a.m. and 4:00 to 6:30 p.m. for GS-15 employees.

Section I (to be completed by employee)

Option 1: Variable Week Schedule

A variable week schedule has core hours on each workday and a basic work requirement of 80 hours in a biweekly pay period. Employees may vary their arrival and departure times and the number of hours they work in a given workday or workweek within the established flexible time bands.

Option 2: Flexi-tour

A flexi-tour schedule has core hours on each workday and a basic work requirement for full-time employees of 8 hours a day, 40 hours a week, and 80 hours per biweekly pay period. Employees may select a time of arrival and departure, subject to supervisory approval. Once approved, these times remain fixed for each workday, until the next selection period, as determined by OIG.

Start time (between 7:00 a.m. & 9:30 a.m.) _____

End time (between 3:30 p.m. & 6:00 p.m.) _____

Name: (print) _____

Signature: _____

Date: _____

Section II (to be completed by first-line supervisor)

I approve this schedule.

I do not approve this schedule for the following reasons:

Signature: _____

Date: _____

Section III (to be completed by second-line supervisor)

I concur with the first-line supervisor's recommendation.

I do not concur with the first-line supervisor's recommendation for the following reasons:

Signature: _____

Date: _____