



### SHIFT PREFERENCE BY SENIORITY

I, \_\_\_\_\_, hereby request to exercise my rights under Article XIX, Section 4, subsection B, of the RC-9 agreement to change my shift.

Present Shift Assignment: \_\_\_\_\_

Requested Shift Assignment: \_\_\_\_\_

Present Classification: \_\_\_\_\_

Seniority Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Approved
- Disapproved (State Reason) \_\_\_\_\_

Security Director: \_\_\_\_\_ Date: \_\_\_\_\_

- I wish to waive my ten day notification that I am entitled to prior to a shift/day off change. I understand that both parties must be in agreement before this request may be honored.
- I do not wish to waive my ten day notice that I am entitled to prior to a shift/day off change.

Original: Security Director CC: Employee