



ALBIN ENGINEERING SERVICES, INC.
Schedule Authorization Form

This form authorizes the following Albin Engineering employee to work the specified schedule until further notice. The Supervisor signing below recognizes and approves the indicated schedule.

- **No more than forty (40) hours can be scheduled**
- **Scheduled hours cannot cover 7 days per week**
- **No more than 10 hours per day**

Albin Engineering Employee: _____

Work week schedule effective (Saturday, MM/DD/YR): _____

Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
_____	_____	_____	_____	_____	_____	_____
<u>Hours</u>	<u>Hours</u>	<u>Hours</u>	<u>Hours</u>	<u>Hours</u>	<u>Hours</u>	<u>Hours</u>

Please FAX this completed and signed form to Albin Engineering at 408-739-AESI (2374) **PRIOR** to the effective date of the above schedule.

Company

Employees Signature

Supervisor's Signature

Date