Click on the blanks below to complete this form. Please print on plain white paper.

TENNESSEE TECHNOLOGICAL UNIVERSITY
FLEX TIME SCHEDULE

NAME _____ Banner ID T _____

DEPARTMENT _____

I wish to work the following flexible schedule (check one):

Please click on the appropriate line to make your selection.

_____ 7:00 a.m. – 3:30 p.m.
_____ 7:30 a.m. – 4:00 p.m.
_____ 8:00 a.m. – 4:30 p.m.
_____ 8:30 a.m. – 5:00 p.m.
_____ 9:00 a.m. – 5:30 p.m.

Effective Date(s): _____

I understand a one (1) hour lunch break is **required** in each of these schedules.

_____ _____
Employee's Signature Date

_____ _____
Supervisor's Signature Date

_____ _____
Chairperson/Director's Signature Date

_____ _____
Academic or Administrative Officer's Signature Date

FORWARD TO HUMAN RESOURCE SERVICES, BOX 5132

Updated 09/14/04