



# REQUEST FOR MUTUAL SCHEDULE EXCHANGE

## MEMBER #1

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

Station: \_\_\_\_\_

I, \_\_\_\_\_, request a mutual schedule exchange on \_\_\_\_\_  
(Name, title) (Date, tour, time)  
and agree to work for \_\_\_\_\_ on \_\_\_\_\_.  
(Name, title) (Date, tour, time)

I understand that if I fail to report for duty on the date stipulated, the absence will be charged to me and I will be restricted from participating in mutual schedule exchanges for a minimum of 30 days.

\_\_\_\_\_  
Signature of Member #1

\_\_\_\_\_  
Date

## MEMBER #2

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

Station: \_\_\_\_\_

I, \_\_\_\_\_, request a mutual schedule exchange on \_\_\_\_\_  
(Name, title) (Date, tour, time)  
and agree to work for \_\_\_\_\_ on \_\_\_\_\_.  
(Name, title) (Date, tour, time)

I understand that if I fail to report for duty on the date stipulated, the absence will be charged to me and I will be restricted from participating in mutual schedule exchanges for a minimum of 30 days.

\_\_\_\_\_  
Signature of Member #2

\_\_\_\_\_  
Date

## SUPERVISOR #1 ENDORSEMENT

Approved  Denied

\_\_\_\_\_  
Name/Rank of Immediate Supervisor

\_\_\_\_\_  
Signature of Immediate Supervisor

\_\_\_\_\_  
Date

## SUPERVISOR #2 ENDORSEMENT

Approved  Denied

\_\_\_\_\_  
Name/Rank of Immediate Supervisor

\_\_\_\_\_  
Signature of Immediate Supervisor

\_\_\_\_\_  
Date

## DIRECTIONS:

- Both members are to complete their part of this form and ensure that the form is signed and dated.
- Upon completion, **forward/fax the form to each member's immediate supervisor for approval.**
- If both members are assigned to the same location, only one supervisory endorsement is required.