

REQUEST FOR REARRANGEMENT OF WORKWEEK FOR EDUCATIONAL PURPOSES							DATE
<i>(This form is subject to the Privacy Act of 1974 - See Privacy Act Statement on Reverse)</i>							
THRU DIVISION DIRECTORATE STAFF OFFICE		TO DPCEB			FROM		
1. NAME OF APPLICANT		2. COURSE NUMBER AND TITLE			3. CREDIT HOURS		
					4. SCHOOL CONDUCTING COURSE		
5. COURSE DURATION FROM (Day - Month) TO (Day - Month)		6. DAYS OF WEEK CLASS CONDUCTED			7. HOURS COURSE CONDUCTED		
8. DUTY HOURS (Can't Exceed 8 Hours Daily)	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
PRESENT							
PROPOSE							
9. EMPLOYEE CERTIFICATION							
REQUEST REARRANGEMENT OF MY WORKWEEK FOR EDUCATION PURPOSES AS INDICATED ABOVE.							
EMPLOYEE'S SIGNATURE			GRADE AND POSITION TITLE		PHONE	DATE	
10. IMMEDIATE SUPERVISOR CERTIFICATION							
<p>A. COURSE IS <u>NOT</u> AGENCY REQUIRED OR DIRECTED AND EMPLOYEE IS <u>NOT</u> RECEIVING AGENCY FUNDS FOR ANY PART OF THE TUITION.</p> <p>B. REARRANGEMENT OF EMPLOYEE'S WORKWEEK WILL NOT INTERFERE WITH WORK REQUIRED TO BE PERFORMED, i.e., WORK MAY BE ASSIGNED IN QUANTITIES WHICH CAN BE READILY ASSESSED BY PROGRESS MADE OR OTHER SUPERVISION IS AVAILABLE.</p> <p>C. NIGHWORK <input type="checkbox"/> IS <input type="checkbox"/> IS NOT NORMALLY SCHEDULED IN THE ORGANIZATION.</p> <p>D. SUNDAY <input type="checkbox"/> IS <input type="checkbox"/> IS NOT NORMALLY SCHEDULED IN THE ORGANIZATION.</p> <p>E. NO ADDITIONAL COST FOR PERSONAL SERVICES WILL BE INCURRED, i.e., HAVING TO PAY OVERTIME TO AN EMPLOYEE WHOSE WORKWEEK IS CHANGED.</p> <p>F. COURSES BEING TAKEN WILL EQUIP THE EMPLOYEE FOR MORE EFFECTIVE WORK WITHIN THE AIR FORCE (Courses need not be job related).</p> <p>G. CURRENT ENERGY POSTURE HAS BEEN CONSIDERED IN ACTING ON THIS REQUEST.</p> <p>H. OTHER COMMENTS:</p>							
IMMEDIATE SUPERVISOR'S SIGNATURE			TITLE		PHONE	DATE	
11. APPROVAL OR DISAPPROVAL							
THRU DIVISION DIRECTORATE STAFF OFFICE		TO			FROM DPCEB		
12. REQUEST FOR REARRANGEMENT OF WORKWEEK IS							
<input type="checkbox"/> APPROVED. REQUEST THE CIVILIAN PAY SECTION AND THIS OFFICE BE INFORMED IF APPROVED TOUR IS DISCONTINUED PRIOR TO							
<input type="checkbox"/> DISAPPROVED. (Specify Reason)							
13. EMPLOYEE <input type="checkbox"/> IS <input type="checkbox"/> IS NOT ENTITLED TO SHIFT DIFFERENTIAL							
E <input type="checkbox"/> IS <input type="checkbox"/> IS NOT ENTITLED TO SUNDAY PREMIUM PAY							
APPROVED BY			SIGNATURE			DATE	

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About the ITAOP/savePDF Method

The traditional Field-by-Field creation process is extremely ineffective and slow.

The only realistic option to create high-quality forms is the Insert-Text-Anywhere-on-Page (ITAOP) method.

The field creation process is about 10,000 times faster than the traditional method; the list of ITAOP features is not even available for the traditional method.

ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).

PRIVACY ACT STATEMENT

AUTHORITY:

*Title 5, US Code, Section 6101(A)(4).
Title 5, US Code, Section 301, Powers of the Executive Agencies.
Executive Order 9397, 22 Nov 43.*

PRINCIPAL PURPOSES:

To request rearrangement of workweek for educational purposes.

Use of the Social Security Account Number (SSN) is used as identifier throughout an employee's Federal career, from the time of application through retirement. It will be used primarily to identify records filed with the CSC or agency.

ROUTINE USE:

Information used by the Personnel Office to approve/disapprove requests for rearranged work schedules to allow employees the opportunity of taking courses at nearby educational institutions during off-duty hours. Information may require use by other Government officials in official performance of their duty and may become a part of Official Records Systems as announced in the Federal Register. Data may be disclosed to any governmental investigative office as well as state agencies or courts of competent jurisdiction. Disclosure is made pursuant to freedom of information act. The SSN will be used by the US CSC and other Federal agencies in connection with lawful requests for information about you from your former employers, educational institutions, and financial or other organizations. The information gathered through the use of the number will be used only as necessary in personnel administration processes carried out in accordance with established regulations and published notices of systems of records. The SSN also will be used for the selection of persons to be included in statistical studies of personnel management matters. Use of the SSN is necessary to make positive identification of the individual and records.

WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION:

Disclosure is voluntary. Failure to provide the information could jeopardize employee's approval of request for rearrangement of workweek for educational purposes. Disclosure of the SSN is necessary to obtain the benefits that are being sought.