# WORK SCHEDULE AGREEMENT
# EMPLOYEE - MANAGEMENT CONTRACT

BETWEEN
INSTALLATION MANAGEMENT COMMAND (IMCOM)
AND

Effective Date:

**Employee Name (*Last, First, MI.)* and Division**

**NOTE: Employee (1st) and supervisor (2nd) must initial each item in the space provided below.**

**WORK SCHEDULE:**

Week 1 (If CWS, *indicate the regularly scheduled day off as RDO)*

| DAY | START TIME | STOP TIME | NUMBER OF HOURS PER DAY |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Week 2 (If CWS, *indicate the regularly scheduled day off as RDO)*

| DAY | START TIME | STOP TIME | NUMBER OF HOURS PER DAY |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| ***Grand Total (Two week total must equal 80 hours)*** | | | |

**Leave:** Employee agrees to follow established procedures for requesting and obtaining approval for leave. Leave will be taken in accordance with the established leave policies.

**Overtime:** Employee and supervisor are aware of the provisions delineated in HQ IMCOM and AEC Policy for Managing Overtime and Compensatory Time dated 5 July 2022.

**Work Assignment or Performance:** The employee understands that a decline in job performance and/or documented misconduct may be grounds for cancelling an AWS agreement.

**Termination of Agreement:** The responsible official may terminate and employee's participation in an AWS at any time if mission requirements deem it necessary or it is determined that an employee is abusing the AWS privilege. Employee participation may also be terminated at the request of the employee (after notifying the supervisor), the employee's supervisor, or upper management.

## SIGNATURES

| Employee Signature | Date |
|---|---|
| | |

## APPROVAL

☐ Recommend Approval
☐ Recommend Disapproval

| Supervisor Signature | Date |
|---|---|
| | |