



# EUROPEAN SERVICE AT HOME INC.

## EMPLOYEE AVAILABILITY FORM

Approved:	YES	NO
Date:		Admin:

Name: \_\_\_\_\_

Home: (    )

Work: (    )

Other (    )

Email: \_\_\_\_\_

Please enter the days and hours you are available to work. Be specific – remember we will match your availability to the clients' needs. We schedule within your available times, not for the entire availability. Employee may change their availability at anytime during their employment. **All changes to availability are subject to approval** and must meet company needs. If requested changes do not fall within the parameters of the company needs the employee may not qualify for continued employment with the company. Employees will not be scheduled outside of their approved availability. European Service at Home Inc. will make every effort to accommodate employee preferences, but **preferences are never guaranteed** and employees are required to work their shifts as scheduled. Your current availability stays in effect if a new availability is not approved. Approval is based on the needs of the company in order to meet clients' requirements. This Availability Form should accurately reflect when employee is available for work. Working schedules are produced based on the information provided on this form.

### Preferences:

- Days   
 Nights   
 Overnights   
 Weekends   
 Weekday Live In   
 Weekend Live In

MONDAY	from		until	
TUESDAY	from		until	
WEDNESDAY	from		until	
THURSDAY	from		until	
FRIDAY	from		until	
SATURDAY	from		until	
SUNDAY	from		until	

### COMMENTS

Please list any problems, possible changes, etc. that would affect your availability or explain any situation:

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I UNDERSTAND THAT MY WORK SCHEDULE WILL BE BASED ON THE DAYS AND TIMES THAT I HAVE INDICATED I AM AVAILABLE TO WORK. I HAVE READ, UNDERSTAND AND AGREE TO FOLLOW THE AVAILABILITY POLICIES LISTED ABOVE.

Signature \_\_\_\_\_

Date \_\_\_\_\_