SUPERVISOR REQUEST TO RESCIND FLEXIBLE, COMPRESSED AND TELEWORK SCHEDULE

1. **Employee's Information**

   Name: ___________________________________________________________________________  
   Last                                                                                     First and Middle Initial

   Administration: ___________________________________________________________________  Employee ID: ________________________________

2. **Program Rescission Requested**

   - **Flexible Schedule.** Indicate your preferred tour of duty and check the type of flexible schedule you would like.
     - Start Time: _____________________________________________________________________
     - End Time: _______________________________________________________________________
     - Variable Day Schedule
     - Individual Weekly Schedule
     - Flexible Work Day Schedule

   - **Compressed Schedule.** Indicate the number of day(s) you are requesting to be off.
     - One
     - Two

   - **Telework (Routine).** Indicate the day(s) you are requesting to telework.
     - Week 1:  
       - Monday
       - Tuesday
       - Wednesday
       - Thursday
       - Friday
     - Week 2:  
       - Monday
       - Tuesday
       - Wednesday
       - Thursday
       - Friday

   - **Telework (Situational).**

3. **Resulting Schedule**

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<th><strong>FIRST WEEK</strong></th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
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<th><strong>SECOND WEEK</strong></th>
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4. **Justification for Rescission**

   Consistent with the AWS policy, requests to rescind an alternative work schedule or telework schedule require approval. On the line below, please explain why you are requesting rescission of the employee’s schedule. Use additional paper if necessary and any supplemental documents as needed.

   ________________________________________________________________________________

   Supervisor                                                                                   Date

   Deputy Director/Chief of Staff                                                               Date

   Director                                                                                      Date

   Employee                                                                                      Date