



Rev 08/07

## WORK AVAILABILITY SCHEDULE

**ATTACH A PRINTED COPY OF YOUR OFFICIAL CLASS SCHEDULE  
(as printed from UNCGENIE)**

**This schedule is for:**

Fall Semester \_\_\_\_\_ 1st Summer Session \_\_\_\_\_ No of Hours you would like to work \_\_\_\_\_  
 Spring Semester \_\_\_\_\_ 2nd Summer Session \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_

Please mark out with an X the times that you **CANNOT** work.

	SUN	MON	TUE	WED	THU	FRI	SAT
6:00							
7:00							
8:00							
9:00							
9:30							
10:00							
11:00							
12:00							
12:30							
1:00							
2:00							
3:00							
3:30							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							
10:00							
11:00							

Please list any days or shifts that you would prefer to work and any other information you would like to provide concerning your work schedule: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_