New Paltz
STATE UNIVERSITY OF NEW YORK

Human Resources, Diversity & Inclusion
Haggerty 603 ▪ 845-257-3171 ▪ Fax: (845) 257-3621

APPLICATION FOR
VOLUNTARY REDUCTION IN WORK SCHEDULE
(VRWS)

Name_____
         Last   *First*   *Middle Initial*

Title _____ Division_____

Office _____ Negotiating Unit _____

Percent reduction in work schedule requested: _____ %   Number of pay periods of participation: _____ pay periods.

VR time to be earned during agreement period: _____ days

Beginning first day of pay period #_____. Date: ____/____/____   Ending last day of pay period #_____. Date: ____/____/____

Normal work schedule . . . . _____ hours/week;   _____ hours/pay period.

Reduced average work schedule . . . . . . _____ hours/week;   _____ hours/pay period.

VR time earned . . . . _____ hours/week;   _____ hours/pay period.

Check type of Proposed Schedule of VR time use below. Specify schedule* for use of VR time on page 2 of application.

A.   ☐ Shorter workday/Normal workweek

B.   ☐ Shorter workweek/Normal workday

C.   ☐ Coordination with Alternative Work Schedule (AWS) arrangement: Longer workday/Shorter workweek

D.   ☐ Block(s) of time off

E.   ☐ Intermittent time off (specify pattern, if any.) _____

F.   ☐ Combination of above

Employee Signature_____ Date_____

*NOTE: Can be changed upon mutual agreement.

☐ APPROVED   ☐ DISAPPROVED *(attach written justification and transmit to Human Resources, Diversity & Inclusion)*

Effective Date: _____

I agree to the proposed temporary adjustment in work schedule and understand that this employee will work a prorated share of their normal schedule over the duration of the agreement period.

Supervisor_____ Date_____

Director or Vice President _____ Date_____

Submit completed forms to Human Resources, Diversity & Inclusion, Haggerty 603

☐ APPROVED   ☐ DISAPPROVED   Salary Grade _____   Line Number_____

Human Resources, Diversity & Inclusion _____ Date_____

PAYROLL USE ONLY

Agency Code _____   Agency _____

SCHEDULE FOR USE OF VR TIME

NAME _____   AGENCY CODE _____

PAYROLL PERIOD _____		TH	FR	SA	SU	MO	TU	WE	TH	FR	SA	SU	MO	TU	WE
NO.	DATES COVERED														
1															
2															
3															
4															
5															
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INSTRUCTIONS

1. In Payroll Period column, indicate beginning and ending dates of each pay period covered by the agreement.

2. For each pay period, indicate all days/time worked (include number of hours worked) and days/time not worked, that is, indicate all pass days and all VR time off. If you plan to use other accruals in conjunction with VR schedule, these days/this time should also be included in the schedule. Use the codes listed below to indicate category of days/time.

3. Where the schedule repeats each pay period, fill out the schedule (include number of hours worked/not worked) and days off for the first pay period only and indicate "same" for subsequent pay periods.

4. For partial day absences, indicate number of hours worked/off and code for category of leave (for example, 5.5-W; 2-VR).

WORK/LEAVE CATEGORY CODES

VR - VR Leave   AL - Annual Leave   W - Day Worked   X - Pass Days