

COMMANDER, NAVY INSTALLATIONS COMMAND WORK SCHEDULE CHANGE REQUEST								
1. FULL NAME					2. EMPLOYING ACTIVITY UIC:			
3. EFFECTIVE DATE OF CHANGE			4. PERMANENT TEMPORARY			5. RESUME NORMAL SCHEDULE DATE		
6. WEEK 1		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
SHIFT	IN							
	OUT							
MEAL	FROM							
	TO							
HOURS SCHEDULED								
GS	WG							
ENTER NIGHT DIFFERENTIAL HOURS								
7. WEEK 2		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
SHIFT	IN							
	OUT							
MEAL	FROM							
	TO							
HOURS SCHEDULED								
GS	WG							
ENTER NIGHT DIFFERENTIAL HOURS								
8. EMAIL ADDRESS			9. TELEPHONE NUMBER			10. EMPLOYING ACTIVITY		
11. SUPERVISOR SIGNATURE					12. DATE			
13. ADDITIONAL INFORMATION								