



Employee Availability Form

Every employee of New Beginnings Home Care Inc. MUST work an every other (rotating) weekend and every other (rotating) Holiday.

OPEN means, you are available to work any day or night shift that may be open and available on that day without restrictions. Restriction could be but are not limited to one of the following; daycare needs, transportation needs, time off request or prior engagements such as doctor and school appointments.

Any time off request made on your weekend to work may result in a double weekend worked or possibly a change in your rotating weekend.

So with these in mind, CAREFULLY fill out the form below with your available time to be able to be scheduled to work.

Thank you,
NBHC Inc.

Email Address: _____

Please circle ALL that apply below

Notes:

Sunday - _____ AM/PM To _____ AM/PM

Monday - _____ AM/PM To _____ AM/PM

Tuesday - _____ AM/PM To _____ AM/PM

Wednesday - _____ AM/PM To _____ AM/PM

Thursday - _____ AM/PM To _____ AM/PM

Friday - _____ AM/PM To _____ AM/PM

Saturday - _____ AM/PM To _____ AM/PM

I would like to work in the county of: Cayuga / Onondaga / Oswego / Seneca / Cortland

By circling the above counties you are hereby agreeing to work these counties

I travel to work by: Bus / Drive / Locate Rides

By circling the above means of transportation you are stating that this is how you get to any shift you are scheduled for without complication.

By signing below you attest that these are the times in which you are able to work. Also you understand any restrictions on any day may keep you from obtaining full time hours, until the availability you indicated is changed by you in writing and the paper is signed and dated by you.

3 weeks notice is needed before change will occur due to schedules going out in a 2 week cycle.

I understand I will be held to this availability for the first 90 days of employment with NBHC. Failure to comply with this policy, or any misrepresentation may lead to disciplinary action up to and including termination.

Signature: _____ Date: _____

Print Name: _____

For Office Use Only:	
Scanned	<input type="checkbox"/>
Saved to Employee File	<input type="checkbox"/>