

Request to Exchange Shift(s) for Vacation or Lieu (ONA Employees)

	Requesting Employee Information
Employee Name:	
Employee Number:	
Department:	
I am currently scheduled to work:	
	Date (YYYY/MM/DD)
	to
	Scheduled Hours
I will be taking (You must take from	a vacation, lieu or overtime bank):
Vacation	
Lieu	
Banked Overtime	
By signing I acknowledge I have su	fficient accrual bank balance to cover the exchange.
Employee Signature	Date
	Accepting Employee Information
Employee Name:	
Employee Number:	
Department:	
By signing I acknowledge that I am	accepting the shift above.
Employee Signature	
IT IS UNDERSTOO	D THAT THIS EXCHANGE WILL NOT RESULT IN OVERTIME Department Manager
Manager Signature	Date
	People Services Centre
Date received in PSC	
Updated in ESP	
PSC Signature	Date