



Assignment Order

* If temporary assignment includes hours outside of (paid) FLSA workweek, enter FLSA workweek and send copy to FLSA coordinator.

**For qualified LSM/FSM operator who works intermittently on higher level, enter "None."

To: (Name)		Position Title			Employee ID			PP	PSDS Entry	YR		
					Home Installation			Day	Init.	Hrs.		
								Sat 01				
▼ Employee Regular Tour ▼		Off Days	FLSA	Des/Act	LDC	Rate	Level	Pay Loc.		Sun 02		
Begin Tour	Lunch-Retrn.	Sat. Sun. Mon.	E/N	Code		Sched.				Mon 03		
Lunch-Out	End Work	Tues. Wed. Th. Fri.								Tue 04		
▼ You Are Assigned and Directed to Perform the Duties as Follows: ▼										Wed 05		
Position Title		FLSA Workweek*	FLSA	Des/Act	LDC	Rate	Level	Pay Loc.		Thur 06		
		F S	E/N	Code		Sched.				Fri 07		
▼ Assignment Tour ▼		Off Days	Location (Give exact worksite. If route, give number.)			Finance No.					Sat 08	
Begin Tour	Lunch Retn.	Sat. Sun. Mon.									Sun 09	
Lunch-Out	End Work	Tues. Wed. Th. Fri.									Mon 10	
▼ Beginning of Assignment ▼					▼ Approximate Ending of Assignment ▼					Tue 11		
Date		Time	AM	PM	Date**		Time	AM	PM	Wed 12		
Reasons for Assignment		Check if Applicable									Thur 13	
<input type="checkbox"/> Other (Explain):	<input type="checkbox"/> Vacancy	<input type="checkbox"/> Scheduled Day off	<input type="checkbox"/> Bargaining Unit Employee Notified by Wednesday of Week Preceding Change (Not Required for clerk craft if detailed to a nonbargaining position.)									Fri 14
	<input type="checkbox"/> Annual Leave		<input type="checkbox"/> Nonbargaining Employee Given 7 Days Notice									
	<input type="checkbox"/> Sick Leave	<input type="checkbox"/> Detail										
Supervisor's Signature		Date	Employee's Signature			Date					<input type="checkbox"/> Continued on Reverse	

Instructions

1. **Purpose.** Complete this form to record management-directed assignment changes involving:
 - a. Temporary assignments to perform duties other than those in employee's official job description, including higher level and training assignments.
 - b. Scheduled hours and/or days off when schedule change is not posted.
2. **Frequency.** Prepare a new form for each accounting period.
3. **Approvals.** Assignments and changes may be approved by immediate supervisor.
4. **Signatures.** If employee is unable to sign form, the supervisor should indicate and also identify how the employee was notified in the employee signature space.

PP Day	PSDS Entry		YR Hrs.
	Init.		
Sat 01			
Sun 02			
Mon 03			
Tue 04			
Wed 05			
Thur 06			
Fri 07			
Sat 08			
Sun 09			
Mon 10			
Tue 11			
Wed 12			
Thur 13			
Fri 14			