

UNavailability Calendar



CAREGIVER NAME

PREFERENCES

Do you prefer: **DAYS** or **OVERNIGHTS**

Do you prefer: **4x 24 HOUR SHIFTS** or **2x 3 HOUR SHIFTS**

How many hours do you prefer: _____ (We try hard, but hours can't be guaranteed and changes may occur.)

What is your preferred mode of contact: **HOME PHONE** **MOBILE PHONE** **TEXT** **EMAIL**

If there's been any changes to your phone or email, please list them here: _____

NOTE: This is a 5 weekend month, you may be required to work 3 weekends this month, so **please leave at least 3 weekends available** on the UNavailability Calendar.

To best serve our clients, each caregiver is assigned 3-4 holidays to work for 2018. The assignments are as follows.

Team A: New Years, Memorial Day, Labor Day, and Christmas. **Team B:** Easter, July 4th, Thanksgiving, and Christmas Eve.

Please **mark** the time slots for which you are **NOT** available. Any **blank slots** will be considered **OPEN** for scheduling.

W1	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Date	1	2	3	4	5	6	7
6:00a							
7:00a							
8:00a							
9:00a							
10:00a							
11:00a							
12:00p							
1:00p							
2:00p							
3:00p							
4:00p							
5:00p							
6:00p							
7:00p							
8:00p							
9:00p							
10:00p							
OVER NIGHT							

W1	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Date	1	2	3	4	5	6	7
6:00a							
7:00a							
8:00a							
9:00a							
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11:00a							
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OVER NIGHT							