

Name:	
Classification/Position:	
Department and Facility: (referred from)	

In accordance with the temporary letter of understanding with regards to Labour Pools, I am available to be **assigned** the below specified number of hours or shifts per week by the Labour Pool:

- Number of hours per week _____ (e.g. 32 hours/week); or
Number of shifts per week _____ (e.g. 4 shifts/week)
- Are you working part-time or casual/relief shifts in another work area?
Yes () No ()

If yes, where (department(s) and facility(ies)) _____.

Employee Signature:	
Telephone No.:	
Address:	
Date:	

NOTE: This form will be in addition to any existing casual/relief availability form(s) an employee may have completed. This form should be used in situations where an employee:

- Is volunteering for the Labour Pool (casual/relief or part-time); or
- Has already been assigned to the Labour Pool (part-time) and volunteers to by assigned additional hours; or
- Has already been assigned to the Labour Pool (casual/relief or part-time) and volunteers to increase the number of hours or shifts per week to be assigned.

This form must be submitted to the Manager of the referring Department/Facility to be sent to the Labour Pool.

FOR MANAGER/LABOUR POOL USE ONLY

Referring Manager (printed): _____

Date Received by Labour Pool: _____