

**ASSIGNMENT to ALTERNATE WORK SCHEDULE #2**  
**Pursuant to LOA 23GG001**  
between the  
**STATE OF ALASKA**  
and the  
**ALASKA STATE EMPLOYEES ASSOCIATION**  
representing the  
**GENERAL GOVERNMENT UNIT**

As set out in the terms of the Alternate Workweek Master Letter of Agreement 23GG001, the following bargaining unit member is appointed to the alternate schedule designated below:

PCN	Employee Name	Employee ID#	Job Classification

The work schedule shall consist of 37:30 hours within the defined workweek, with at least two consecutive days off. The defined workweek\* begins on (day of week) \_\_\_\_\_ at midnight and ends on (day of week) \_\_\_\_\_ at midnight.

\*The defined workweek should begin at midnight of the last consecutive regular day off (RDO).

The regularly scheduled workdays and hours, and RDOs, are as follows (add additional RDOs):

Day:								Total
Hours:						RDO	RDO	37:30

Management reserves the right to alter this schedule, when necessary, to meet the business needs of the workplace with consideration of the employee's needs, in accordance with the collective bargaining agreement.

This assignment shall be effective on (day, date) \_\_\_\_\_, \_\_\_\_\_ and shall remain in effect through (date) \_\_\_\_\_ (no later than June 30, 2025). Either party may cancel upon fifteen calendar (15) days written notice, with concurrent notice to the Payroll Services Manager. In the event of cancellation, the affected employee shall return to a normal work schedule in the first week following the required notice period.

Changes to any work schedule adopted under this agreement, other than temporary changes of a brief duration, must be made by executing a new Alternate Workweek Schedule Assignment Form.

**APPROVALS:**

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member's Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
DOP&LR Payroll Services Manager (or designee)

\_\_\_\_\_  
Date

cc: ASEA/AFSCME Local 52 (via email scan or facsimile)