

AVAILABILITY CHECKLIST

Please complete the following checklist to indicate your availability (i.e.) times/days you are available to work

Name: _____	Phone: _____
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Availability:

Shift times	MON	TUE	WED	THUR	FRI	SAT	SUN
7am – 3pm							
3pm – 11pm							
3pm – sleepover							
11pm – 7am (wake over)							
Other							