STATE OF HAWAII

ALTERNATIVE WORKWEEK (AWW) GUIDELINES

APPENDIX A

BARGAINING UNITS 2, 3, 4, 9, AND 13

I. IDENTIFYING INFORMATION

A. DEPARTMENT: ____________________________

B. DIVISION/BRANCH/SECTION (as appropriate): ____________________________

C. BARGAINING UNIT(S): ____________________________

D. CLASSES OF WORK (if limited to certain classes/occupations within the BU)


II. DESIGNATIONS (Check off those that are applicable to this AWW program)

A. EXCEPTIONS TO PARTICIPATION IN AWW PROGRAM
   Unless specifically waived by the program manager the following employees are not eligible to participate in the AWW program:

   1. _____ Initial probationary employee
   2. _____ New probationary employee
   3. _____ 89-Day appointee
   4. _____ Temporary appointee less than _____ months
   5. _____ Exempt employee
   6. _____ Shift worker
   7. _____ Officially served a notice to improve
   8. _____ Other--Specify: ____________________________
B. Core Work Days

1. _____ Monday
2. _____ Tuesday
3. _____ Wednesday
4. _____ Thursday
5. _____ Friday

C. Available Options

1. _____ The 4-10 Schedule
2. _____ The 4-9-4 Schedule
3. _____ The 8-9-1 Schedule (Only for employees exempt from FLSA)

D. Start and Ending Times (if other than as specified in Guidelines)

1. 4-10 Schedule -- Start:___________ End:______________
2. 4-9-4 Schedule -- Start:___________ End:______________
3. 8-9-1 Schedule -- Start:___________ End:______________

E. Duration of Work Schedule

1. _____ 4 Weeks
2. _____ 12 Weeks
3. _______ Duration of the Agreement
F. Must Revert to a Five Day, Eight Hour (5 - 8) Schedule When:

1. _____ Mandatory training on employee's day off
2. _____ Court hearing on employee's day off
3. _____ Mandatory meeting on employee's day off
4. _____ State holiday occurs during the week
5. _____ Employee is attending an all-day event away from the work site
6. _____ Employee is traveling in or out of State
7. _____ As directed by the Employer based upon operational needs.

_________________________  __________________________
Dept. Personnel Officer        Date