



LEADERS HOLDING CO.TM

Est. 1971

Schedule Availability

Team Member Name _____

Showroom Name _____

I am available to work the following days:

☐ Full Time

- ✓ Any day of the week
- ✓ A minimum of five-days per week
- ✓ Sales Team Members 40 hours week
- ✓ Managers and Assistant Managers 44 hours per week

☐ Part Time - No more than 30 hours per week, available on the following days (check each day that applies)

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday
- ☐ Sunday

I understand that once approved, I will be expected to continue my commitment to this availability. My days off and shifts may vary from week to week. I must submit any availability changes in writing to a manager. The changes must be approved and signed off on by a Sales Leadership team member. If the changes in my availability do not meet the needs of the business, then my employment may be terminated. My availability must meet the needs of the business.

Signature _____ Date _____/_____/_____