

U.S. DEPARTMENT OF AGRICULTURE
 AGRICULTURAL MARKETING SERVICE
 POULTRY PROGRAMS

**WORK SCHEDULE REQUEST
 VOLUNTARY GRADING SERVICE**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0128. The time required to complete this information collection is estimated to average .25 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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NAME AND ADDRESS OF FIRM (Include Zip Code)

PLANT NO.

In compliance with the applicable Agreement and regulations (7 CFR Parts 56 or 70), it is requested that the days and number of hours shown below be established as the normal work schedule(s) for this plant.

It is understood that:

1. The scheduled number of hours assigned below for Voluntary Grading Service will be the number of hours of work for which the plant will be rendered service at the regular rate charge for Voluntary Grading Service for shell eggs, rabbits, and poultry. The plant is responsible for payment of all contracted hours whether work is available or not.
2. The hours worked in excess of those scheduled each day or on a nonscheduled workday are to be considered overtime and will be charged to the plant at the overtime rate.
3. Graders are to be notified by plant management not later than the preceding workday of any changes in the start of a grader's tour.
4. The hours requested below are effective no earlier than the beginning of the biweekly pay period following concurrence.
5. The number of Holiday hours assigned below will be charged to the plant at the respective regular rate for each Federal Holiday. These hours are based on the number of hours per work schedule requested by the plant.

HOURS SCHEDULED FOR GRADER "A"

EFFECTIVE DATE	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTAL
NO. HOURS →								

HOURS SCHEDULED FOR GRADER "B"

EFFECTIVE DATE	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTAL
NO. HOURS →								

HOURS SCHEDULED FOR GRADER "C"

EFFECTIVE DATE	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTAL
NO. HOURS →								

HOURS SCHEDULED FOR GRADER "D"

EFFECTIVE DATE	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTAL
NO. HOURS →								

HOLIDAY HOURS	REGULAR _____	NIGHT DIFFERENTIAL _____						
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DATE	TITLE OF FIRM REPRESENTATIVE	SIGNATURE OF FIRM REPRESENTATIVE
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CONCURRENCE

DATE	SIGNATURE OF REGIONAL DIRECTOR
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