

# Volunteer Notification

Telephone No. _____	Board Period From _____ To _____
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Name _____	Empl. No. _____	Div. Sen. Page No. _____
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<b>I am signed on:</b>	Crew _____	Route _____	Off Days _____	Start Time _____	Finish Time _____
				Start Time _____	Finish Time _____

Indicate if you have any vacation dates during this period:  
 from \_\_\_\_\_ to \_\_\_\_\_

If on Vacation Swings, I am available for:  
 Week

1	2	3	4	5	6
<input type="checkbox"/> OD <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> No Work	<input type="checkbox"/> OD <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> No Work	<input type="checkbox"/> OD <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> No Work	<input type="checkbox"/> OD <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> No Work	<input type="checkbox"/> OD <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> No Work	<input type="checkbox"/> OD <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> No Work

(Indicate Off-Days for each week)

## IMPORTANT

- To be submitted **10 days** prior to start of New Period.
- If unable to fulfill commitment, notify Slip Clerk immediately.

### My Work Preferences are:

- Subway                       SRT
- Streetcar                       Bus
- Charters
- Special Services

### I am Volunteering for:

### OFF DAYS:

- A.M. ONLY
- P.M. ONLY
- ALL DAY

Will you do reliefs?

- Yes                       No

### AM Extra

Finished by: **A.M.**

### PM Extra

Start after: **P.M.**