

1. Fill out request with all signatures.
2. Forward completed request form to CREW SCHEDULING.
3. Crew Scheduling will return a copy of the request with approval or disapproval noted.
4. If a return copy is not received 24 hours before trip(s) affected, **you must call Crew Scheduling.**

CREWMEMBER #1 _____
Emp. # _____ Name _____ Line # _____

Dom. _____ Signature _____ Date _____

TRIP ADDED	DATE OF OPERATION	TRIP DROPPED	DATE OF OPERATION

REMARKS: _____

CREWMEMBER #2 _____
Emp. # _____ Name _____ Line # _____

Dom. _____ Signature _____ Date _____

TRIP ADDED	DATE OF OPERATION	TRIP DROPPED	DATE OF OPERATION

REMARKS: _____

CREW SCHEDULING (For Office Use Only)	
Date Received: _____	
Approved/Disapproved by: _____	
REMARKS: _____	

