

WAYPOINT CENTRE for MENTAL HEALTH CARE

AVAILABILITY SHEET

Schedule Date: October 12, 2026

TO: November 22, 2026

NAME: _____ **Please (click):** Full Time Part time Casual
Program: _____ **Skill (click):** RN RPN PCA OSW
Contact Number: _____ **Contact Email:** _____

Split Shifts (circle): Yes No **Max hrs per Pay Period:** _____
 (For PT: minimum 24 hrs per week)

E-mail: @staffingoffice, your Clinical Manager and cc your Unit Clerk

Availability must be received by: September 7, 2026

PLEASE NOTE: Availability should be submitted by due date after the **24 hour** schedule is posted.
 Please mark only the dates and times that you are **AVAILABLE** to be scheduled for.
 If you do not submit your availability by the date indicated, you will only be scheduled
 the **24 hours previously scheduled**.

MONDAY Oct 12 (H)		TUESDAY Oct 13		WEDNESDAY Oct 14		THURSDAY Oct 15		FRIDAY Oct 16		SATURDAY Oct 17		SUNDAY Oct 18	
	7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11
	11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15
	15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19
	19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23
	23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7
	All Day		All Day		All Day		All Day		All Day		All Day		All Day

MONDAY Oct 19		TUESDAY Oct 20		WEDNESDAY Oct 21		THURSDAY Oct 22		FRIDAY Oct 23		SATURDAY Oct 24		SUNDAY Oct 25	
	7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11
	11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15
	15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19
	19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23
	23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7
	All Day		All Day		All Day		All Day		All Day		All Day		All Day

MONDAY Oct 26		TUESDAY Oct 27		WEDNESDAY Oct 28		THURSDAY Oct 29		FRIDAY Oct 30		SATURDAY Oct 31		SUNDAY Nov 1	
	7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11
	11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15
	15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19
	19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23
	23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7
	All Day		All Day		All Day		All Day		All Day		All Day		All Day

MONDAY Nov 2		TUESDAY Nov 3		WEDNESDAY Nov 4		THURSDAY Nov 5		FRIDAY Nov 6		SATURDAY Nov 7		SUNDAY Nov 8	
	7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11
	11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15
	15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19
	19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23
	23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7
	All Day		All Day		All Day		All Day		All Day		All Day		All Day

Two additional weeks on back

WAYPOINT CENTRE for MENTAL HEALTH CARE

AVAILABILITY SHEET

MONDAY Nov 9		TUESDAY Nov 10		WEDNESDAY Nov 11(H)		THURSDAY Nov 12		FRIDAY Nov 13		SATURDAY Nov 14		SUNDAY Nov 15	
	7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11
	11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15
	15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19
	19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23
	23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7
	All Day		All Day		All Day		All Day		All Day		All Day		All Day

MONDAY Nov 16		TUESDAY Nov 17		WEDNESDAY Nov 18		THURSDAY Nov 19		FRIDAY Nov 20		SATURDAY Nov 21		SUNDAY Nov 22	
	7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11		7 to 11
	11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15		11 to 15
	15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19		15 to 19
	19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23		19 to 23
	23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7		23 to 7
	All Day		All Day		All Day		All Day		All Day		All Day		All Day

Date Received: _____