

WAYPOINT CENTRE for MENTAL HEALTH CARE

AVAILABILITY SHEET

Schedule Date: October 28, 2024 **TO:** December 8 2024

NAME: _____ **Please (click):** Full Time Part time Casual
Program: _____ **Skill (click):** RN RPN PCA OSW 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 23, 2024

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	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Oct 28	Oct 29	Oct 30	Oct 31	Nov 1	Nov 2	Nov 3
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	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Nov 4	Nov 5	Nov 6	Nov 7	Nov 8	Nov 9	Nov 10
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	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Nov 11 (H)	Nov 12	Nov 13	Nov 14	Nov 15	Nov 16	Nov 17
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	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Nov 18	Nov 19	Nov 20	Nov 21	Nov 22	Nov 23	Nov 24
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

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MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
Nov 25		Nov 26		Nov 27		Nov 28		Nov 29		Nov 30		Dec 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		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
Dec 2		Dec 3		Dec 4		Dec 5		Dec 6		Dec 7		Dec 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

Date Received: _____