



**AFFORDABLE**  
I N N S

**Availability Schedule**

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Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Please specify the times you are able to work for each day. Please DO NOT leave any days blank. If you need certain days off, write "Not Available". Please explain in detail why you would need these days off and provide any other information we may need to know regarding your availability.

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Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_