

NIGHT SHIFT SCHEDULE

Employee: _____

Period: Week of ____ / ____ / 202__

SHIFT TIME	MON	TUE	WED	THU	FRI	SAT	SUN
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Start Time

End Time

Break 1

Meal Break

Break 2

Station/Unit

SHIFT HANDOVER & SPECIAL INSTRUCTIONS

Authorized Signature: _____ Date: _____