

VSSA Template

LOCATION/Endroit
Lyleton, MB

PERIOD/Période
from/de to/à

SIGNED BY:
Signature:

NAME OF OFFICER																																																																																					
Nom de l'agent		M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S																					
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	3	AD	AD	AD							AD	AD	AD					AD	AD	AD									AD	AD																																																							
	4					AD	AD	AD				AD	AD	TD							AD	AD						AD	AD																																																								
	5			AD	AD	AD				AD	AD	AD					AD	AD	AD											AD	AD																																																						
	6																																																																																				
SHIFT Coverage		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								

hours
300.50
300.00
300.00
300.00
300.00
0.00

AD = 0900-2200
B = 0000-0800
TD = 0800-1400