



PRINCE EDWARD ISLAND UNION OF
PUBLIC SECTOR EMPLOYEES

Required to work a Double Shift

First Shift

Second Shift

Date:

Date:

Shift (D) (E) (N) (8) (12)

Shift (D) (E) (N) (8) (12)

Worksite

Worksite

Unit

Unit

On the above date/s, I _____ was required to work to work a double shift without my consent.

I advised my Supervisor _____ that I was not consenting, but was still required to work.

UPSE Member Signature

Contact Information

PHN: _____

Email: _____