

DEER PARK SILVERTON JOINT FIRE DISTRICT

SHIFT TRADE FORMS

(To be completed for all full and part time shift changes)

Scheduled Employee: _____

Date of Shift: _____ Hours: _____ To _____

Coverage

Employee Covering: _____

Employee Covering Signature: _____

Trade

Employee Trading: _____

Date of Trade: _____ Hours: _____ To _____

Employee Trading Signature: _____

This coverage/ trade form must be submitted to Deputy Chief Iredale prior to the scheduled shift. All shift changes must be approved by an officer.

Scheduled Employee Signature: _____

Approved By: _____ Date: _____

Approved shift changes must be marked on the master schedule located in the Deputy Chief's office.