



DUTY EXCHANGE APPLICATION

I .....	A) Number:
---------	------------

Working duty:
1
2

In week ending:

Ask permission to change this duty to:
1
2

On the following days:
1
2

B) Name:	B) Number:
----------	------------

Signed:

A)
----

B)
----

Date Input:

--

OFFICE USE ONLY  
NB: 14 DAYS NOTICE  
REQUIRED FOR  
EXCHANGES  
INVOLVING  
SATURDAY PRIOR  
TO HOLIDAYS

Date of Application:

--

NOT LESS THAN 2 DAYS NOTICE BE GIVEN FOR EXCHANGE