



**Office of the Water Engineer**  
**Employee Physical Fitness Program**

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**Date:**            **Date**  
**Employee:**    **Employee Name**  
**Position:**    **Employee Position**  
**RE:**            **Employee Physical Fitness Program Agreement**  
**Supervisor:** **Employee Supervisor**

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Office of the Water Engineer (OE) Personnel Policies provide for an employee physical fitness program breaks pursuant Policy Set 5.04:

Office of the Engineer Employees may participate for up to four (4) hours per week in physical fitness activities. No more than one-half of the time utilized by the employee shall be paid time, and no less than one-half of the time utilized shall be paid time off, lunch breaks, or time before and after working hours. Prior to initiating leave for physical fitness, an employee shall complete an “employee Physical Fitness Program” form and submit it to their immediate supervisor for consideration and approval.

This agreement may be rescinded by the supervisor at any time.

**Description of Physical Activity:** **Insert Narrative**

**Requested Schedule for Participation in Activity:** **Insert Schedule**

**##.##** hours/week – Amount of Paid Regular Time (part of employee’s work schedule)

**##.##** hours/week – Amount of Total Match Time (PTO, Comp, Personal combined)

**##.##** hours/week - Amount of PTO

**##.##** hours/week - Amount of Comp Time

**##.##** hours/week - Amount of Lunch Break

**##.##** hours/week – Amount of Personal Time

**##.##** hours/week –Total Hours Per Week

I, **employee name**, request matched time for wellness breaks pursuant the terms of this agreement and I release the Board of any liability for any accident or injury incurred in the course of participating in the above-mentioned activity.

\_\_\_\_\_

Date \_\_\_\_\_

**Employee Name, Title**

\_\_\_\_\_

Date \_\_\_\_\_

**Employee Supervisor, Title**