



Light Duty Assignment – External Department

OHR/OMS:

Employee Name: _____ Employee ID: _____

Daytime Phone: _____ Personal Email Address: _____

Home Dept/Division: _____ Dept Contact: _____

Light Duty Dept/Division: _____ Dept Contact: _____

Start Date _____ Expected End Date _____ (up to 6 month max)

OMS Follow-up Date _____

LIGHT DUTY DEPARTMENT:

Light Duty Location: _____ Report To: _____

Parking:

- Public Parking Parking Pass Required County Badge Required Pay Parking Transit Accessible

Additional Parking Information: _____

Light Duty Days/Times:

- Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

- Saturday _____ Sunday _____

Light Duty Attire: _____

Light Duty Tasks: (brief description)

Completed By: _____ Date: _____

Note: Please email the employees hours worked to the contact above at the home department by the last day of each pay period on the Light Duty Employee Time Card Form.

Email Completed form to dpm@montgomerycountymd.gov or fax to 240-777-5186.



Light Duty Assignment – External Department

Employee Time Card

Pay Period ____/____/____ to ____/____/____

Employee Name: _____ Employee ID: _____

Home Department: _____ Dept Contact: _____

Light Duty Department: _____

Week 1		
Day	Date	Hours
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Week 2		
Day	Date	Hours
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Completed By: _____ Date: _____

Note: Please email the employees hours worked to the contact above at the home department [and dpm@montgomerycountymd.gov](mailto:dpm@montgomerycountymd.gov) by the last day of each pay period.

Regular attendance is required for employees who accept a light duty assignment. Normal call in procedures must be followed. Employees should however be permitted to attend doctors appointments and monthly OMS appointments.