

Borough of Manhattan Community College The City University of New York www.bmcc.cuny.edu 199 Chambers Street New York, NY 10007-1097 tel. 212-220-8300 fax 212-220-2364

TO: **Executive Compensation Plan** Instructional Staff, Non-Teaching Civil Service Staff Excluding B & G Plant Operations & Campus Security FROM: Gulen Zubizarreta Summer Work Schedules – Options for Four-Day Week – 2025 RE: DATE: May 7, 2025 CUNY's four-day summer workweek will be in effect from Monday, June 9, 2025, through Friday, August 15, 2025, excluding the workweeks that include Juneteenth (observed on Thursday, June 19th), and Independence Day (observed on Friday, July 4th). Employees will work four (4) regular un-extended seven-hour days those two weeks (Monday, Tuesday, Wednesday & Fri. the week of June 16th and Monday, Tuesday, Wednesday, Thursday, the week of July 4th). During the other four-day summer workweeks, the College will be closed on these Fridays: June 13th, June 27th, July 11th, July 18th, July 25th, August 1st, August 8th and August 15th. DC37 Local 924 has not agreed to CUNY four-day summer workweek for Laborers. Laborers who wish to work a fourday week may request working four regular days and requesting Fridays off. Please select and check the scheduled option you prefer and return this form to officeofhumanresources@bmcc.cuny.edu on or before June 2, 2025. **OPTION 1** 35-HOUR WEEK Work Monday through Thursday, 8 \(^1\)4 hours per day (1 \(^1\)4 hours extra per day). 8:30 a.m. to 6:00 p.m. - 45minute lunch period. Off on Friday – no charge to annual leave. If you take an annual or sick day, you will be charged for the number of scheduled work hours $-8 \frac{3}{4}$ hours. **OPTION 2** 28-HOUR WEEK Work your regular 7-hour schedule, Monday through Thursday. Charge one-day annual leave for Friday. If you elect Option 2, please submit an approved application for leave form to request the 8 Fridays and other projected annual leave. NOTE: THE SUMMER WORK SCHEDULE YOU SELECT AT THIS TIME CANNOT BE CHANGED **AFTER JUNE 9, 2025** Name (Print) Signature _____ Date: ____

Department

Supervisor's Signature _____

Date: