Kentucky Center for Performance Excellence

Calendar Request Form

**To:**

*(team leader)*

**From:**

*(team member)*

**Subject:** Dates Unavailable Form

**Cross out the dates when you are ABSOLUTELY, POSITIVELY NOT available to participate in the consensus meeting or site visit. Please do NOT cross out dates if you could rearrange your schedule and become available. Return this form to your team leader.**

|  |  |  |
| --- | --- | --- |
| **January 2017** |  | **February 2017** |
| Sun | Mon | Tue | Wed | Thur | Fri | Sat |  | Sun | Mon | Tue | Wed | Thur | Fri | Sat |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |  |  |  | 1 | 2 | 3 | 4 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |  | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |  | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |  | 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 29 | 30 | 31 |  |  |  |  |  | 26 | 27 | 28 |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **March 2017** |  | **April 2017** |
| Sun | Mon | Tue | Wed | Thur | Fri | Sat |  | Sun | Mon | Tue | Wed | Thur | Fri | Sat |
|  |  |  | 1 | 2 | 3 | 4 |  |  |  |  |  |  |  | 1 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |  | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |  | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |  | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 26 | 27 | 28 | 29 | 30 | 31 |  |  | 23 | 24 | 25 | 26 | 27 | 28 | 29 |
|  |  |  |  |  |  |  |  | 30 |  |  |  |  |  |  |