

Physical Fitness Time for Civilians, Excerpt from AFI 36-815, as of 11 January 2018

10.13. Health and Wellness.

10.13.1. As part of a comprehensive employee health and wellness program, Installation Commanders or heads of serviced organizations may excuse civilian employees for health, wellness or physical fitness activities up to 3 hours per week based on mission and workload requirements. Participation is strictly voluntary.

10.13.2. Health and wellness activities may be events sponsored by installation health and wellness centers (HAWCs), medical treatment facilities or other recognized organizations. These events include but are not limited to: health fairs; alcohol and tobacco cessation programs; diet and nutrition classes; relaxation and stress management classes or seminars; lactation classes and seminars; and work-life programs. Employees must notify supervisors in advance of the events to ensure attendance does not conflict with work center requirements. For events exceeding three hours in a single week, the employee will submit a leave request for all time in excess of three hours spent at the event(s). (T-0)

10.13.3. Time off for physical fitness activities will be coordinated in advance with management officials with a signed agreement. At a minimum, the agreement will include self-certification by the employee of fitness to engage in physical activity and describe the number of days per week and duration of absences. [Please use Request for Approval of Administrative Leave and Memorandum of Understanding for Physical Fitness Activities (1/11/18)]

10.13.3.1. Employees must be present prior to or following fitness time. In order to minimize travel time away from work, employees will utilize installation fitness facilities or facilities immediately adjacent to the installation or work center with which the employee or agency may have an agreement to provide fitness facilities for that agency. Fitness time is normally approved in conjunction with the lunch break. (T-3)

10.13.3.2. Employees engaged in telework shall not take time off to perform fitness activities while teleworking. (T-3)

10.13.4. For bargaining unit employees, time-off for health, wellness and fitness at installations or agencies that are governed under a negotiated bargaining agreement will adhere to the language of that agreement to the exclusion of this Air Force Instruction. (T-0)

Request for Approval of Administrative Leave and Memorandum of Understanding for Physical Fitness Activities (1/11/18)

EMPLOYEE:

I, _____, request approval of administrative leave, not to exceed three hours per week, for the sole purpose of participating in health, wellness or physical fitness activities.

I understand (employee must initial each line):

___ I self-certify I am able to participate in physical fitness activities. I am responsible for expenses required to obtain this documentation.

___ I will utilize on-base facilities or a federally-approved facility during the work day that is conveniently located near the work site during any period of administrative leave for physical activities.

___ My participation is subject to supervisory approval and scheduling based on mission and workload requirements.

___ If my request is not approved or I cannot be released from work for physical fitness activities due to mission requirements. I may not challenge the decision unless the decision is arbitrary or based on discrimination.

___ I must record each absence on my time sheet as administrative leave (LN).

___ I may use the three hours of excused absence in blocks of up to 1.5 hours per day, that the time may not be banked for future use if not used during the week, and that the time allotted includes time required to travel, change clothes, prepare for sports, etc.

___ I must report to work before going to the exercise site and I must report back to work after the fitness activity even if the exercise is the last thing done in the afternoon.

___ That in order to enhance mission effectiveness, I must make every effort to improve my health and well-being during any period of administrative leave for the purpose of physical fitness.

___ This memorandum of understanding will be maintained in the employee's work folder.

___ Should my ability to participate in physical fitness activities become limited in any manner, I will notify my supervisor immediately.

Employee's signature

Date

FIRST LEVEL SUPERVISOR ENDORSEMENT

___ Approved

___ Disapproved because _____

Supervisor's signature

Date

Optional Documentation of Expected Days/Times for Fitness Activities

How do I code Physical Fitness time in ATAAPS?

Add rows for your regular time (RG) and Administrative Leave (LN), click on save. This will bring up the below screen.

					November	30	1	2	3	4	5
	Work Center	Job Order	Op Code	Type hr	Sun	Mon	Tue	Wed	Thu	Fri	
<input type="checkbox"/>	460FSS	460BUCKLEY		RG		8.00	7.00	8.00	7.00	7.00	
Sub Acct					NtDiff						
User Data					Hz/Oth	Add	Add	Add	Add	Add	
					FLSA	Add	Add	Add	Add	Add	
<input type="checkbox"/>	460FSS	460BUCKLEY		LN			1.00		1.00	1.00	
Sub Acct					NtDiff						
User Data					Hz/Oth		Add		Add	Add	
					FLSA		Add		Add	Add	
Scheduled Hours					0.00	8.00	8.00	8.00	8.00	8.00	
Reported to Scheduled Hours					0.00	8.00	8.00	8.00	8.00	8.00	
Save	DeleteRow	CopyRow	NtDiff/Haz/Oth	InsertRow	Refresh	Summary	Create LU				

On the Hz/Oth row, click on Add which will bring up this box. Scroll and select PF-Physical Fitness and check the appropriate days. Click on Reason to finish and go back to timecard. It should appear like the bottom image.

Date: 12/16/2014
 Job Order: 460BUCKLEY
 OP Code:
 Type Hours: Admin

Reason:
 BD - Labor Management Relations
 BK - Grievance and Appeals
PF - Physical Fitness
 PH - Preventative Health

December 14 15 16 17 18 19 20 21 22

Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			

Employee Hours					December	14	15	16	17	18	19
	Work Center	Job Order	Op Code	Type hr	Sun	Mon	Tue	Wed	Thu	Fri	
<input type="checkbox"/>	460FSS	460BUCKLEY		RG		8.00	7.00	8.00	7.00	7.00	
Sub Acct					NtDiff						
User Data					Hz/Oth	Add	Add	Add	Add	Add	
					FLSA	Add	Add	Add	Add	Add	
<input type="checkbox"/>	460FSS	460BUCKLEY		LN			1.00		1.00	1.00	
Sub Acct					NtDiff						
User Data					Hz/Oth		PF		PF	PF	
					FLSA		Add		Add	Add	
Scheduled Hours					0.00	8.00	8.00	8.00	8.00	8.00	
Reported to Scheduled Hours					0.00	8.00	8.00	8.00	8.00	8.00	
Save	DeleteRow	CopyRow	NtDiff/Haz/Oth	InsertRow	Refresh	Summary	Create LU				