



**AUTHORIZATION FOR NON EXEMPT
EMPLOYEE USE OF OVERTIME**

INSTRUCTIONS: To request employee overtime, the employee's immediate supervisor should complete this form and submit for approval to the appropriate manager, principal or director, as indicated below. An approved copy should be provided to the employee **prior to the use of overtime** or as soon as possible following the day on which overtime was used.

EMPLOYEE INFORMATION

Employee Name _____

Home School/Office _____

Employee ID # _____

Job/Position Title _____

Overtime Location _____

(If different from Home School/Office)

Overtime Dates(s) _____ to _____

Number of Overtime Hours Requested _____

SECTION 1: OVERTIME ACTIVITY/JUSTIFICATION

Reason for Overtime (Check as appropriate)

Special Projects*

Special Events Coverage

All Other Reasons:

Custodian

School

Supervisory coverage

Construction project

Maintenance

Community

Security Coverage

Extension of shift

Grounds

Reservation#: _____

Equipment failure

Building Emergency

Clerical

Weather event

Other _____

Other _____

*Project specifics: _____

Reason(s) that the task must be performed on overtime rather than during regular work hours.

If authorization is after the fact, check the appropriate reason:

Confirmation of prior verbal authorization by _____

Other (please explain) _____

SECTION 2: APPROVAL INFORMATION

Immediate Supervisor Authorization:

Approved Not Approved _____ / / _____

Signature (Immediate Supervisor)

Final Authorization:

Approved Not Approved _____ / / _____

Signature (Account Manager/Principal)