**Overtime Pre-approval Request Form**

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| **To:** | |  | | | | **Date** | | | | |  | | | | |
| **From:** | |  | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| 1. **Request for Overtime Work** | | | | |  | | | | | | | | | |  |
| **A** | Purpose (include brief description of an justification of proposed overtime work) | | | | | | | | | | | | | | |
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| **B** | 1. Period of overtime to be worked | | | | | From | -- | | -- | -- | To | -- | -- | -- |  |
|  | 1. Number of employees | | | | |  | | | | | | | | |  |
|  | 1. Number of overtime hours requested | | | | |  | | | | | | | | |  |
|  | 1. Estimated cost of overtime to be paid | | | | |  | | | | | | | | |  |
|  | 1. Estimated number of compensatory hours | | | | |  | | | | | | | | |  |
|  | | | | | | | | | | | | | | | |
| **C** | List of employees (attach list if needed) | | | | | | | | | | | | | |  |
|  | **Employee Name** | | **Position** | **ID #** | | | | **Overtime Hours (Requested)** | | | | **Est. Cost** | | |  |
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|  | **Total** | | | | | | |  | | | |  | | |  |
| 1. **Declaration** | | | | |  | | | | | | | | | | |
| Before authorizing the above mentioned overtime work, I have considered other alternatives including but not limited to the following: | | | | | | | | | | | | | | | |
| 1. Deferring the work or adjusting deadlines or schedules. | | | | | | | | | | | | | | | |
| 1. Safety of the personnel and securing the college assets. | | | | | | | | | | | | | | | |
| 1. Abidance of college rules/regulations while working beyond the normal working hours or on weekends/ vacation. | | | | | | | | | | | | | | | |
| 1. Documents developed or produced will remain the sole property of college. | | | | | | | | | | | | | | | |
| 1. A through report will be submitted to Managing Director upon the completion of work. | | | | | | | | | | | | | | | |

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| **Authorized by** |
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| **Approved by** |
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| **Managing Director** |