

**NORTHWESTERN STATE UNIVERSITY**  
**CLASSIFIED EMPLOYEE**  
**REQUEST FOR APPROVAL FOR OVERTIME WORK**  
(See Reverse Side for Instructions on Completing Form)

1. Name of Employee \_\_\_\_\_ EID# or SS# \_\_\_\_\_

2. Date(s) overtime will be performed: Total

Travel Status (Y/N)	(List each date on separate line)	From: (time)	To: (time)	Hours
/	/	/	/	
/	/	/	/	
/	/	/	/	
/	/	/	/	

3. Describe work to be performed in detail \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Who requested work done? \_\_\_\_\_

5. Charge Budget Unit/Account: TITLE: \_\_\_\_\_ NUMBER: \_\_\_\_\_

**Overtime**

To Non-University Organization Name: \_\_\_\_\_  
To Be Billed: Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Choice of Compensation By Employee**

6.  Payment  Credit for Compensatory Leave

\_\_\_\_\_  
Signature Date

\*\*\*\*\*

**Supervisor's Certification**

7. I hereby certify that requested work cannot be done during the employee's normal work schedule and that I have made every possible effort to resolve the need for overtime.

Approved  Not Approved

\_\_\_\_\_  
Signature Date

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**Budget Unit Head's Approval to Charge Budget Unit/Account**

8. I hereby certify that the work performed was required and I authorize overtime to be charged to the account identified above for which I am the responsible Budget Unit Head.

Approved  Not Approved

\_\_\_\_\_  
Signature Date

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**Budget Unit Head's/Approving Agent's Approval**

9. I have reviewed the conditions of this request and agree with the certification above.

Approved  Not Approved

\_\_\_\_\_  
Signature Date

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**Vice President's Approval**

10. I have reviewed the conditions of this request and agree with the certification above.

Approved  Not Approved

\_\_\_\_\_  
Signature Date

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**Business Affairs Section**

11. Overtime Rate \_\_\_\_\_ Hours Worked \_\_\_\_\_ Total Overtime \_\_\_\_\_ Account Charged \_\_\_\_\_ Account Budget Balance After Payment \$ \_\_\_\_\_  
Verified By: \_\_\_\_\_ Date \_\_\_\_\_

## Instructions for completing Overtime Form

**Request for Approval for Overtime Work** form should be completed in duplicate by the supervisor of the employee who is to perform the work. This request must be approved by the employee's Vice President at least 48 hours prior to the work being performed, except in emergency situations which required immediate action. The supervisor must have prior authorization to assign emergency overtime work and be able to justify the emergency.

This document becomes a part of the University's official payroll records. Falsification of this form may result in disciplinary action.

This form is a request to work overtime. Actual hours of overtime worked is recorded and submitted on the employee's Daily Attendance and Leave Report. The employee's Daily Attendance and Leave Report are used to authorize actual overtime payment or compensatory time credit.

### Item

1. Name and ID number/SS# of employee who will perform overtime work. Fill out a separate request for each employee if more than one employee will perform overtime work. Have the employee complete ITEM 6.
2. Indicate if overtime will be performed while in Travel Status: Yes/No
3. If overtime work will be performed on more than one date, list each date on a separate line.
4. The description of overtime work should include such information as: place where work will be done, the event requiring overtime work, and reason the work cannot be done during regular working hours.
5. Name of person and/or organization (if applicable) requesting overtime work.
6. Budget Unit/Account to be charged for the overtime work. Identify Non-University organization to be charged and billed if not a University Budget Unit. Include address for billing.
7. The employee who is to perform the work must make the selection of compensation, sign and date the form. This should be completed before the supervisor signs the request.
8. Supervisor's certification.
9. Budget Unit Head's Approval. If unapproved, returns to Supervisor for review and discussion.
10. Budget Unit Head's Approving Agent Approval. If unapproved, returns to Budget Unit Head for review and discussion.
11. Vice President's Approval. Upon approval/disapproval of the appropriate Vice President, a copy of this form will be forwarded to the Supervisor. Informs Approving Agent and Budget Unit Head if unapproved. Approved and unapproved requests are returned to Budget Unit Head or Supervisor for submission with employee's Daily Attendance and Leave Report (see Daily Attendance and Leave Report procedure).
12. For Business Affairs use only.