



ADDITIONAL HOURS APPROVAL FORM

All additional hours must be documented and signed by the parties listed below. Approvals must be obtained before the additional hours are worked. In case of an emergency, approvals must be obtained the day after the additional hours are worked. All approvals must accompany the time sheet for the employee.

EMPLOYEE NAME: _____ EMPLOYEE NUMBER: _____

DATE OF ADDITIONAL HOURS: _____.

BEGINNING TIME: _____ ENDING TIME: _____

REASON FOR ADDITIONAL HOURS:

SIGNATURE OF EMPLOYEE: _____ DATE: _____

SIGNATURE OF SUPERVISOR: _____ DATE: _____

SIGNATURE OF DEPARTMENT HEAD: _____ DATE: _____

HUMAN RESOURCES/PAYROLL: _____ DATE: _____