

**Overtime Authorization Form**

Employees who anticipate the need for overtime to complete work assignments must notify their supervisor in advance and obtain approval prior to working hours that extend beyond their normal work schedule.

Employee name: \_\_\_\_\_

Department: \_\_\_\_\_

Date of overtime work: \_\_\_\_\_ Number of hours: \_\_\_\_\_

Project or budget to be charged: \_\_\_\_\_

Explanation of why work cannot be completed during regularly scheduled work hours:

\_\_\_\_\_

Supervisor's signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

Date: \_\_\_\_\_

Employees must attach this completed form to the time record in which the overtime hours were worked. Employees who fail to obtain approval prior to working hours that extend beyond their normal workweek will be subject to disciplinary action. Repeated offenses may result in termination.