# COMPENSATORY/OVERTIME REQUEST FORM (NON-EXEMPT EMPLOYEES ONLY)

Imployees may accrue a maximum of 240 to always be requested until an employee has inance department. The University and sup tease outs. Some departments have accep-	accrued 240 hours. Who ervisors have the author	are funds are available, exceptions may rity to control the use and payout of con-	be authorized by the Elusiness and apensatory time.
hame (consult your supervisor for details).	The second second second second second	The same of the sa	
Name of Employee		Employee Number	
Date Departmen	•		300.945575.53
Approximate Number of Hours in Exces	s of 40/Week Approv	ed to Work	
Call Back Hours	x 1.5 -	x hourly rate	- Cost \$
) Overtime Pay Hours	x 1.5 -	x hourly rate	- Cost 6
) Compensatory Time Hours			
Straight Time (excluding working	on a holiday)	hours x hourly rate	- Cost S
) Funds have been secured from a	non ASU source		
Date(s) From To		Include Holiday? ( ) Yes ( ) N	io .
Account Number to be Charged (Requir		Estimati	ed Cost \$
Name of Event		( ) ASU Event ( ) Non ASU Ev	ent
Justification for Overtime/Compensator	y Timo		
rateora sa un super assara di fun alterna di accessiona di della come di della della come di della della come d La			
	A CO	PROVAL	
Immediate Supervisor		Di Di	ala
Cost Center Manager/Dept. Head		D. D.	aho
Area Vice President		D	ate
Business and Finance			alo
Section II - Verification of Act			

compensatory time with prior approval of the immediate sugervisor, area vice president and the vice president for Susiness and Finance or their designees.

Authority Non-Academic Staff Handbook, Section 2.1. ((a): No sugervisor is authorized to germit a non-example employee to earn overtime?

Number of Compensatory/Overtime Hours Worked

Immediate Supervisor's Signature

# **Sample Form For Exempt Overtime**

**VM** Jensen

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