

**Diocese of Sacramento — Human Resources Services
OVERTIME REQUEST AND PRE-AUTHORIZATION FORM**

EMPLOYEE NAME: _____ DEPT: _____

FOR NON-EXEMPT EMPLOYEES ONLY. ALL OVERTIME MUST BE **PRE-AUTHORIZED** BY THE DEPARTMENT ADMINISTRATOR/SUPERVISOR.

DATES OF EXPECTED OVERTIME	SCHEDULE OF OVERTIME HOURS			REASON FOR OVERTIME REQUEST
	OVERTIME SHIFT		TOTAL OVERTIME HOURS REQUESTED	
	START	END		

SUPERVISOR'S SIGNATURE

DATE

Overtime is approved

Overtime is denied

Approved form must be attached to your timesheet when submitting to payroll. Failure to attach authorization to your timesheet could lead to disciplinary action up to and including termination.

PT 510 (10/16) Refer to Chapter III of the LAY PERSONNEL HANDBOOK for a description of the policy regarding overtime.

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