**Edwin Fair CMHC**

**Overtime Authorization Form**

**Employee Requesting Overtime:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*(Print full Name)*

**Employee Signature: \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*(Signature)*

**Purpose of Overtime Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Hours to be worked in excess of 40: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(Dates: from and to / Hours: from and to)*

**Supervisor Authorizing Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(Signature)*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(Date)*

**Number of Hours Overtime in Excess of 40 Hours to be paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(Authorized overtime Hours)*

*Employee Signature Date Supervisor Signature Date*

**Instructions**

1. **Purpose:** The purpose of this policy is to control labor costs by managing the expense of overtime pay to nonexempt employees.
2. **Compliance:** Edwin Fair CMHC pays time and one-half to nonexempt employees who exceed 40 hours of time in a workweek.
3. Paid leave, such as holiday, sick or vacation pay, does not apply toward work time.
4. The workweek begins at 12:00 a.m. on Thursday morning and ends at 11:59 p.m. on Wednesday night.
5. **Overtime Approval:** Coordinators are required to obtain approval from Management Team prior to the use of overtime. Employees who anticipate the need for overtime to complete the weeks work must notify the Coordinator in advance and obtain approval prior to working hours that extend beyond their normal schedule.