

REQUEST FOR OVERTIME COMPENSATION FORM

SYLACAUGA CITY BOARD OF EDUCATION
Sylacauga, Alabama

Note: All work tasks requiring overtime compensation must be approved in accordance with policy 3.9.5

Based on provisions of the Fair Labor Standards Act, "exempt" positions are not entitled to overtime pay. "Exempt" employees are those that meet one or more of the following criteria:

Executive, administrative, and professional (certified) employees
Support employees (a) whose primary duties consist of the management of the enterprise in which they are employed, (b) who customarily direct the work of two or more employees, (c) who have the authority to hire or fire or whose suggestions and recommendations as to the hiring, firing, or other change of status decision for other employees will be given particular weight, and (d) who customarily and regularly exercise discretionary powers.

Note: This section should be completed under the direction of the supervisor and submitted to the Superintendent for approval prior to authorizing work requiring overtime compensation of any kind.

I hereby request approval to authorize the following work requiring overtime work by the specified employee(s).

Date(s) Overtime Work To Be Performed _____

Emergency Work Tasks To Be Performed _____

Approximate Overtime Hours Required _____

Name(s) of employee(s) To Perform Work _____

Supervisor Making Request _____

Superintendent's Recommendation: Approved _____ Not Approved _____

Superintendent's Signature _____

Note: This section should be completed by the employee under the direction of the supervisor after approved work is completed and transmitted to the Payroll Office with the monthly payroll report.

I hereby request overtime compensation based on the following information:

Employee's Name _____

Number of Overtime Hours worked _____

Employee's Signature _____

Supervisor's Signature _____