

MONTGOMERY COUNTY PUBLIC SCHOOLS

Authorization for Employee Use of Overtime

Office of Finance
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

INSTRUCTIONS: To request employee overtime, the employee's immediate supervisor should complete this form and submit for approval to the appropriate account manager, according to directions below. An approved copy should be provided to the employee **prior to use of overtime** (if possible) or as soon as possible following the day on which overtime was used. The timekeeper's approval copy should be attached to the employee's time sheet and filed with the payroll records.

EMPLOYEE INFORMATION

Employee Name _____ Base Work Location _____
 Employee ID# _____
 Job/Position Title _____ Location Worked _____
(if different from base location)
 Overtime Date(s) ____/____/____ to ____/____/____ Number of Overtime Hours Requested _____

SECTION 1: REASON FOR OVERTIME

Reason for Overtime *(check as appropriate)*

- Maintenance project Construction project Indoor air quality Equipment failure Emergency situation
 Keep schools in operation To meet deadlines
 OTHER: Additional reason(s) for overtime requires signature of the associate superintendent of finance/designee

Reason for Overtime *Please Explain*

If authorization is after the fact, check the appropriate reason:

- Confirmation of prior verbal authorization
 Other (please explain) _____

I understand that my electronic submission of this form and my electronic signature are intended to be, constitute, and are equivalent to my personal signature.

_____ /_____/_____
Signature, Principal/Base-School Building Service/Cafeteria Manager; Supervisor *Date*

SECTION 2: APPROVAL

ACCOUNT MANAGER

- Maintenance Materials Management Food and Nutrition Services Transportation Plant Operations
 School and Financial Operations Team Other _____

Authorization:

Approved Not Approved _____
Signature, Account Manager *Date*

APPROVAL REQUIRED FOR EMERGENCY OVERTIME

Authorization:

Approved Not Approved _____
Signature, Associate Superintendent of Finance/Designee *Date*