HENRY COUNTY BOARD OF EDUCATION

REQUEST FOR OVERTIME

Employee Name_____ Location_____
(Please print or type)

Date for which overtime/extended time is requested_____

Approximate number of hours requested_____

Explain work that will be done during this time_____

_____

<u>I understand that I must have the written approval of my principal or supervisor if at all possible before</u> I perform work beyond 40 hours, I will be paid 1 1/2 times my regular hourly rate or will be granted compensatory time at a rate of 1 1/2 hours for every hour worked over 40 in the work week.

I also understand that overtime should be requested because there is a need for such work for the benefit of the school system and that it is not appropriate for me to request overtime for my benefit or convenience.

"Exempt" positions are not entitled to overtime pay or compensatory release time. Exempt employees are those that typically meet one or more of the following criteria:

1. **Executive, administrative and professional certified employees.**
2. **Non-certified employees (a) whose 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.**

_____

Employee Signature **Employee Position** **Date**

_____

Administrator/Supervisor Signature **Date** ☐ **Approved**

_____

Superintendent's Signature **Date** ☐ **Not Approved**