



# South Bay Union Elementary School District Overtime Pre-Approval Form

ALL OVERTIME MUST HAVE PRIOR APPROVAL OF THE SUPERINTENDENT OR DESIGNEE

School / Department:

Date of Request:

REQUEST PERMISSION FOR THE FOLLOWING TO WORK OVERTIME:

EMPLOYEE NAME	DATE(S) REQUESTED	# of HOURS	POSITION
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>REASON FOR REQUESTED OVERTIME</b>	<input type="text"/>		
<b>ACCOUNT NUMBER</b>	<input type="text"/>		

EMPLOYEE: Please choose how you want to be compensated for these hours (***both are at "time and a half" the number of hours worked, for hours worked over a 40 hour week***):

- Compensation Time (over 40 hr/wk)     
  Paid Overtime (over 40 hr/wk)  
 Trade / Flex Time (under 40 hr/wk)     
  Paid Time (under 40 hr/wk)

Director / Coordinator / Administration

- Approved  
 Not Approved

Date

Superintendent / Designee

- Approved  
 Not Approved

Date

**NOTE:** This form must be pre-approved by the Superintendent/Designee **prior to working overtime.** Overtime is considered anything beyond contracted hours. The District Office will NOT pay overtime unless authorized by receipt of this approved form. Failure to follow these procedures will result in nonpayment of overtime. In case of emergency, e-mail pre-approval form to the District Office for approval. Approval is necessary before overtime hours begin.