

**UNIVERSITY OF HAWAII  
LEEWARD COMMUNITY COLLEGE  
REQUEST FOR OVERTIME WORK**

Date: \_\_\_\_\_

To: Dean / Vice Chancellor

From: \_\_\_\_\_  
Supervisor's Name
Supervisor's Signature

Account Number: \_\_\_\_\_

**I. Request for Overtime Work**

A. Purpose (include brief description of and justification for the proposed overtime work):

- B. 1) Period overtime to be worked \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 2) Number of employees \_\_\_\_\_  
 3) Number of overtime hours requested \_\_\_\_\_  
 4) Estimated cost of overtime to be paid \_\_\_\_\_  
 5) Estimated number of compensatory hours \_\_\_\_\_

C. List of employees (attach listing if needed)

<u>Employee Name</u>	<u>Position Title</u>	<u>O.T. Hours Requested</u>	<u>Est. Cost</u>	<u>Est. Comp. Hours</u>
<b><u>TOTAL</u></b>				

**II. Alternatives Considered**

Before authorizing such overtime work, I have considered other alternatives including but not limited to the following:

- 1) Deferring the work or adjusting deadlines or schedules.
- 2) Securing help from other offices within the organization.
- 3) Effecting organization changes and procedural improvements that may eliminate or reduce the work to be done.
- 4) Hiring additional student help or temporary civil service workers.

Authorized by:

\_\_\_\_\_  
Dean / Unit Head / Account Supervisor

\_\_\_\_\_  
Vice Chancellor

If overtime is paid in cash: Certified  
as to availability of funds:

Approved:

\_\_\_\_\_  
Fiscal Officer

\_\_\_\_\_  
Vice Chancellor of Administrative Services