

**REQUEST AND APPROVAL OF OVERTIME**

CONTROL NUMBER

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 5 U.S.C. Chapter 61, Hours of Work; Chapter 53, Pay Rates and Systems; Chapter 57, Travel, Transportation, and Subsistence; and Chapter 63, Leave; 5 U.S.C. 301, Departmental Regulations; 10 U.S.C. 136, Under Secretary of Defense for Personnel and Readiness; 31 U.S.C., Chapter 35, Accounting and Collection; and E.O. 9397 (SSN).

**PURPOSE(S):** Records are used to prepare time and attendance records, to record employee pay rates and status, including overtime, the use of leave, and work absences; to track workload, project activity for analysis and reporting purposes; for statistical reporting on leave and overtime use/usage patterns, number of employees teleworking, etc.; and to answer employee queries on leave, overtime, and pay.

**ROUTINE USES:** The DoD "Blanket Routine Uses" apply to this system of records. They may be found at <http://www.dod.mil/privacy/notices/blanket-uses.html>

**DISCLOSURE:** Voluntary; however, if you fail to supply all the data elements, DLA may not be able to approve your overtime request.

**RULES OF USE:** Rules for collecting, using, retaining, and safeguarding this information are contained in DLA Privacy Act System of Records notice S340.10, DLA Civilian Time and Attendance, Project and Workload Records" available at <http://www.dod.mil/privacy/notices/dla/>

**PART I - REQUEST FOR APPROVAL**

TO \_\_\_\_\_ FROM \_\_\_\_\_

DATE AND TIME PERIODS FOR WHICH OVERTIME IS REQUESTED

IDENTIFICATION NUMBER (Payroll, Social Security, Cost Code, etc.)	NAME OF EMPLOYEE (Indicate by asterisk if supervisor)	GRADE	OVERTIME RATE	OVERTIME REQUESTED			OVERTIME WORKED		
				HOURS		ESTIMATED COST	HOURS		ACTUAL COST
				TIME COMP	FOR PAY		TIME COMP	FOR PAY	
a	b	c	d	e	f	g	h	i	j
>									
TOTAL									

JUSTIFICATION (Workload to be accomplished; productivity expected; availability of funds; effect if not approved)

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**PART II - REVIEW PRIOR TO APPROVING OFFICIAL'S ACTION**

TO \_\_\_\_\_ FROM \_\_\_\_\_

EVALUATION OF REQUEST AND RECOMMENDED ACTION IN ACCORDANCE WITH LOCAL PROCEDURES

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**PART III - APPROVING OFFICIAL'S ACTION**

TO (Requester) \_\_\_\_\_ REQUEST FOR OVERTIME  
 APPROVED  DISAPPROVED

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**- form continues on next page -**

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## PART IV - VERIFICATION OF OVERTIME WORKED AND WORKLOAD ACCOMPLISHED

FROM

TO

APPROVED OVERTIME WORKED HAS BEEN ENTERED IN COLUMNS H, I, AND J, PART I ABOVE  
WORK ACCOMPLISHED AND PRODUCTIVITY ATTAINED DURING OVERTIME WORKED WAS AS FOLLOWS

SIGNATURE OF OFFICIAL COMPLETING PART I

TITLE

DATE

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