

OVERTIME APPROVAL REQUEST FORM – FOR LEASE USE ONLY

To: MNHS – Approval / Disapproval

All overtime requests must be pre-approved by MNHS. Requestor will receive response within two business days.

Emergency overtime that cannot be pre-approved must be immediately faxed to MNHS (518) 786-4969 at the beginning of the next business day.

A detailed and concise explanation must be included under justification. The justification must include information concerning who, what, where, when and why the overtime is required.

LEASE LOCATION

LEASE#

LEASE CONTRACT DATE(S)

JUSTIFICATION:

NAME

TITLE

DATE/TIME /TOTAL HOURS OVERTIME

LOCATION

Date

Requesting Supervisor (Print Name and Title)

Signature