

## CLASSIFIED MONTHLY REPORT OF OVERTIME/EXTRA HOURS

Complete ONLY when applicable

Overtime & Comp Time only: Select Employee regular schedule

Employee Name: \_\_\_\_\_

Pay Period Month & Year: \_\_\_\_\_

Banner ID: \_\_\_\_\_

\*\*\*Please note, all overtime and extra hours should be pre-approved by the supervisor prior to the hours being worked.

Time Code	Date	Hours	Special Funding (optional, enter account string)

Overtime: Hours over 8 hours per day or 40 per week

*Extra Hours:* Hours above regularly scheduled hours but do not qualify as overtime

*Comp Time Earned:* Overtime hours elected to be accrued as comp time to use at a later date

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

Department Supervisor: \_\_\_\_\_\_

Employee: \_\_\_\_\_

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

Employees - please complete this form and email to your supervisor.

**Supervisors** - please forward to payroll@cuesta.edu with your approval by the payroll deadline.