Print Form

UNITED STATES DEPARTMENT OF AGRICULTURE
NATURAL RESOURCES CONSERVATION SERVICE

375 Jackson Street, Suite 600, St. Paul, MN 55101-1854

Re: 360-14-12, Attendance and Leave, Hours of Duty Date: _____

REQUEST FOR OVERTIME PAY OR COMPENSATORY TIME OFF

TO: William Hunt
State Conservationist
NRCS, St. Paul, MN

I, the undersigned employee of Natural Resources Conservation Service, hereby request permission to work overtime, as necessary, for the purpose of:

_____

_____

_____

_____

Total daily work time, including overtime, will not exceed _____ hours per day, Monday through Saturday. The period covered by this request is from _____ through _____. I hereby request (check one) ___ Overtime Pay ___ Compensatory Time Off From Duty, hour for hour, in lieu of overtime pay.

Work on Sundays or Holidays is not approved on this form. Such requests must be submitted by letter to the State Conservationist for consideration.

_____ _____
(Signature) (Date)

Recommended by: _____ _____
(Date)

Concurred by: _____ _____
(Date)

_____Approved _____Disapproved

_____ _____
(State Conservationist) (Date)

Reference will be made to this memorandum on your SCS-FNM-320, Time and Attendance Input Record, under "Remarks" as your authorization each pay period overtime or compensatory time is worked.

REMARKS:

_____

_____

_____

_____