



Center for
Workforce Inclusion
powering opportunity for older adults

Senior Environmental Employment Program (SEE) _____ National Resources Conservation Service (NRCS-ACES) _____
U.S. Forest Service (FS-ACES) _____ U.S. National Park Service (NPS) _____ U.S. Fish & Wildlife Service (FWS) _____

Overtime Work Authorization

Part A: PRE - AUTHORIZATION (*Monitor completes Part A before Enrollee performs overtime work.*)

Name of Enrollee: _____

Position: _____ Work location _____

Expected date / duration of overtime work:

Date: _____	AM: _____	to _____	PM: _____	to _____
Date: _____	AM: _____	to _____	PM: _____	to _____
Date: _____	AM: _____	to _____	PM: _____	to _____
Date: _____	AM: _____	to _____	PM: _____	to _____

Purpose of work: _____

Program / funding source charged for work: _____

Authorized by: _____
(Please print Monitor's Name) _____
(Monitor's Signature)

Part B: OVERTIME WORK PERFORMED (*Enrollee and Monitor complete Part B after authorized work has been performed. To receive credit for overtime work, the completed form must be attached to the timesheet for the applicable pay period.*)

Dates overtime work performed:

Date: _____	AM: _____	to _____	PM: _____	to _____
Date: _____	AM: _____	to _____	PM: _____	to _____
Date: _____	AM: _____	to _____	PM: _____	to _____
Date: _____	AM: _____	to _____	PM: _____	to _____

Enrollee's Signature: _____ Date: _____

Monitor's Signature: _____ Date: _____