REQUEST FOR SHIFT DIFFERENTIAL, OVERBASE, CALLBACK AND/OR			TRS Location Code
OVERTIME PAY FOR MONTHLY PAID EMPLOY		EES	
Employee Name (Please Pr	rint- First, MI, Last)	Employee Number	
			_ OR
Position or Title		Last Four Digits of Social Se	curity Number
		$ \times \times \times - \times \times $	
<b>EMPLOYEE</b> 1. You may report only one week per time sheet. Use separate forms for each pay period/month (see Notice 5620 Pay Schedules for relevant dates			
INSTRUCTIONS: of workweeks and pay periods).   2. Employees paid monthly should submit time sheets for the current workweek by the close of business on the Friday of the current workweek. For .   the last week in the month, employees paid monthly should submit the last week's time sheet no later than the close of the last business day of the current month   3. Overbase, callback and overtime must be authorized by the program manager before hours are worked.   4. Shift reported for all hours, including overbase and callback hours must correspond to the actual overbase and callback hours worked.			
TRS LOCATION 1. Every effort should be made to report Time and Attendance (T&A) into the T&A system on a daily basis.   INSTRUCTIONS: 2. This form must be signed by the employee and program manager or administrative designee, and kept on file at the work location for five years.   3. A copy should be returned to the employee.			
Minutes to Hundredths Table 15 Minutes = .25 30 Minutes = .50 45 Minutes = .75	Attendance Codes B1 = Overbase Regular B2 = Overbase Community Use B3 = Overbase Emergency or Acts of Nature C1 = Callback Regular C2 = Callback Community Use C3 = Callback Emergency or Acts of Nature OM =Overtime Monthly S2 = Shift Evening S3 = Shift Night		
WORKSHEET AREA:			
	uturday Sunday Monday Tuesday Wednesday	Thursday	Friday
Days (MM/DD)			
I	Hours Hours Hours Hours	Hours	Hours
Total Eligible Hours Per Day			
Total Eligible Less 40 Hour Equals Total Overtime Hours Report Total Overtime Hours (OM Attendance Code) as a single entry, on a single day below.   Hours Per Day FLSA Limit (OM Att Code) a single day below.			
HOURS TO BE REPORTE		T1 1	<b>D</b> . 1
Days	tturday Sunday Monday Tuesday Wednesday	Thursday	Friday
(MM/DD)			
Att Code H	Hours Hours Hours Hours Hours	Hours	Hours
Date	Employee Signature	Time and Attendance Pro	cessor Name
Date	Program Manager or Administrative Designee Signature	Title	