**Union-Endicott Overtime Sheet** **School Year:** **Pay Period:**

**EMPLOYEE NAME:** _____ **Building/Dept/Title:** _____

| Date | Time In | Time Out | Contractual Hours Worked | OT Pre-Approval Date/Admin. | Total OT Hrs Worked | OT Start Time | OT End Time | 1.0x | 1.5x | Specific Work Completed |
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| **WEEK** | | | | | | | | | | |

**Employee Signature:** _____ **Date:** _____

**Supervisor Signature:** _____ **Date:** _____