

If you are eligible for compensatory time or overtime in accordance with the Agreement by and between the County of Schenectady and CSEA, Local 10000 AFSCME, AFL – CIO, Article VIII, please complete the information below and return the form to the Office of Human Resources, Elston Hall - 126.

Employee Name:                      Title:                      Department:  
Employee Supervisor:              Budget Code:

**Employee Status - Check all categories that apply:**

- CSEA - Support staff**
- Full-time (35 hours per week)
- Part-time (17 hours per week)
- Part-time (17.50 hours per week)
- CSEA - Maintenance**
- Full-time (40 hours per week)
- Part-time (19.50 hours per week)
- Requesting Compensatory Time**
- OR**
- Requesting Overtime**

**Please provide justification for requesting additional compensatory time or overtime compensation to include specific date(s) and time(s).**

Numbers of additional hours requested:  
Dates: From                                      To

Does this create an overtime event (40+ hours per week)?  YES  NO  
Does the department budget support the request? **Check only one:**  YES  NO

**All signatures are required for approval.**

Required Signatures	Date Signed
1. Applicant:	
2. Supervisor:	
3. Appropriate Vice President/Dean:	
4. Executive Director of Human Resources:	
5. Vice President of Administration:	
6. President:	