

**SCHOOL CITY OF MISHAWAKA
ADMINISTRATION CENTER**

Compensatory Time Application

Your immediate supervisor must approve all compensatory time worked over and above the scheduled 40-hour work week. Only actual hours worked above 40 hours will be approved for compensatory time off. All compensatory time is granted at time and a half.

Name Date

Reason for Overtime

Number of hours worked over 40 to complete task.

(Signature of Applicant)

Approved _____

Supervisor Department

Number of Hours to be Compensated _____

Please retain 1 copy for your record and send 1 copy to the Payroll Department. For auditing purposes, 1 copy must be retained in the employee's payroll file.