

Project-Based Overtime Authorization Form

Project Name

Project Code

Employee Name

Employee ID

Department

Position

Date of Request

Reason for Overtime

Overtime Details

Date	Start Time	End Time	Total Hours	Task / Purpose
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional Comments

Requested By

Date

Approved By (Supervisor/Manager)

Date

For HR / Admin Use

Date