

Official Overtime Extension Notice

Document No.: _____

Date: _____

Employee Name: _____

Employee ID: _____

Department: _____

Overtime Details

Previous
Overtime
Date(s): _____

Extension
Date(s): _____

Start Time: _____

End Time: _____

Total Extended
Hours: _____

Reason for Extension

Prepared by _____

Date: _____

Approved by _____

Date: _____