REQUEST FOR OVERTIME, HOLIDAY PAY, COMPENSATORY TIME, AND CREDIT HOURS

PRIVACY ACT STATEMENT

AUTHORITY: 5 U.S.C. 301, Departmental Regulations; 5 U.S.C. Chapter 53, 55, and 81.

PRINCIPAL PURPOSE(S): To ensure that requests for overtime pay, compensatory time, or credit hours are properly requested, justified and approved to substantiate time and attendance entries.

ROUTINE USE(S): The "Blanket Routine Uses" published at the beginning of the DFAS compilation of systems of records notices apply to this collection.

DISCLOSURE: Voluntary; however, failure to provide a requested information may result in a denial of this request. This collection is covered by DFAS Systems of Records Notice T7335, Defense Civilian Pay System (DCPS).

1. EMPLOYEE NAME *(Last, First, Middle Initial)*	**2. PAY PERIOD NUMBER**

3. REQUEST

A. HOURS REQUESTED	**B. DATE** *(YYYYMMDD)*	**C. OVERTIME** *(See Note 1)*	**D. HOLIDAY PAY**	**E. COMP TIME** *(See Note 2)*	**F. CREDIT HOURS**

NOTE 1: More than 16 hours of overtime per pay period must be approved by Director, WHS.
NOTE 2: Accrued comp time must be used before annual leave.

4. JUSTIFICATION *(Include details requiring additional hours worked)*

5.a. SIGNATURE OF REQUESTER	**b. DATE** *(YYYYMMDD)*
6.a. SIGNATURE OF APPROVING OFFICIAL	**b. DATE** *(YYYYMMDD)*
7.a. SIGNATURE OF CERTIFIER	**b. DATE** *(YYYYMMDD)*