

Republic of the Philippines

PAMPANGA STATE UNIVERSITY

(former Don Honorio Ventura State University)



REQUEST FOR OVERTIME SERVICES FORM (CASH)

(Contract of Service/Job Order)

DATE: _____

The rendering of overtime services is hereby requested for the following personnel:

NAME	College/ Office/ Unit	Overtime Period		Maximum Number of OT Hours/ day	Maximum Total Number of allowable OT for the entire period	Detailed Work to be Accomplished/ Expected Output (Please use extra sheet if needed)
		First Day	Last Day			

REQUESTED BY: _____ Immediate Supervisor	ALLOTMENT AVAILABLE: <u>LUIS M. LANSANG, DPA</u> Chief Administrative Officer	RECOMMENDED BY: _____ Cluster Vice President	APPROVED: <u>ENRIQUE G. BAKING, Ed. D.</u> SUC President III
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Note:

1. Additional documents may be attached to this form to justify the need for overtime services.
2. Submit to the COBU together with the approved teacher's program or approved office schedule for non-teaching personnel.

Received by: _____

Date Received: _____