

**RESA IV
PROFESSIONAL PERSONNEL ALTERATION IN SCHEDULE**

PART 1

(To be completed & given to Executive Director/Designee for approval)

Any alteration in schedule shall be requested and approved in advance per RESA IV policy. If for some reason, the excess time is not worked as planned, this form is void.

I respectfully request approval for working in excess of the regular schedule. I understand that work in excess of the regular schedule and any alteration in said schedule is hour for hour. I plan to work:

Estimated Date/Time: _____

Purpose: _____

Employee Signature _____ Date _____

PART 2

(Executive Director/Designee completes & returns to employee)

Approved: _____ Not Approved: _____

Comments: _____

Executive Director/Designee Signature _____ Date _____

PART 3

(To be completed after approved & earned.
A copy of this form will be filed with employee timesheet)

I would like to request _____ as the date I would like to use for hours worked in excess of the regular schedule.

Initials of Executive Director/Designee _____ Date _____