

REQUEST FOR MAKE-UP TIME
NON-EXEMPT, NON-BARGAINING UNIT

Employee's Name _____
(Please print)

Department _____

I, as a non-exempt, non-bargaining unit employee of Stanford University, request unpaid time off from work for personal obligations and request to be able to make up the time, **within the same workweek.**

I understand and agree that I will not be eligible for overtime pay for hours worked past eight (8), and up to eleven (11) hours on any of the days when I am making up time missed, or to be missed during the same workweek. I understand I will receive overtime pay if I work more than 11 hours on a make-up day or over 40 hours in the same workweek. I understand Stanford University has sole discretion whether to allow make-up time.

On _____, I lost, or will lose, work time from _____ a.m./p.m. to _____ a.m./p.m. due to personal obligations. I hereby request approval to work _____ hours(s) **during this same workweek** by working an additional _____ hours(s) on the following dates:

Employee's Signature

Date

APPROVAL: Yes _____ No _____

Supervisor's Name/Title (Please print)

Date

Supervisor's Signature

CC: Employee
Personnel File

**For a repeating event i.e. class, therapy, etc. a request form may be filled out once every four weeks.