



# EASTERN OREGON UNIVERSITY OVERTIME AUTHORIZATION

Name: \_\_\_\_\_

Date:	Number of hours worked Time of day worked	Reason worked
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Supervisor signature

Original signatures please - Rubber stamps not accepted



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