



City of Palm Springs Overtime/Flex Request

A request for comp time, over time, or flexing a schedule must be made in advance of the work performed or date of adjustment and is at the discretion of the Department Head. The Department Head may deny the request, authorize a different type of adjustment, or approve the adjustment as requested. Any schedule flexing must be completed within the same workweek. See relevant MOU for more information.

Employee Name							
Department							
Type of Request							
Current Schedule (Check any dates being adjusted)				Requested Schedule			
Date	Time	Hours	√	Date	Time	Hours	
Sun				Sun			
Mon				Mon			
Tues				Tues			
Wed				Wed			
Thurs				Thurs			
Fri				Fri			
Sat				Sat			
TOTAL HOURS				TOTAL HOURS			
Reason for Request							

Authorization		
<input type="checkbox"/> Flex Time	<input type="checkbox"/> Comp Time	<input type="checkbox"/> Overtime
<input type="checkbox"/> Other:		

Employee Signature

Date

Supervisor Signature

Date

Approved Denied

Department Head Signature

Date

Approved Denied

COMMENTS: _____