

Extra Service Tracking Record

Give this completed record to HR for compensation along with a copy of the prior authorized agreement. Forms submitted less than 7 business days before the current payday will be processed on the next payday.

Name		Program/Department Served	
Type of Compensa	ation: \square Co	omp Time	
Section 2: Report	ing		
Date(s) of Service	Hours	Description	
Total hours completed for this Service			
Section 3: Verific	ation	I	
	oove work was con	appleted in accordance with the corresponding Extra Service	
Employee Signature		Date	
Supervisor Signature		Date	