



Extra Service Request/Agreement

Please complete and return to Human Resources

Please Type or Print

Employee Name:	Date of Request:
Department <i>(hours to be billed):</i>	Date(s) of Requested Service:
Job Title:	Hours Requested:

(Ongoing Extra service is approved each fiscal year)

Justification for Extra Service: *(Please provide details about why the extra assignment is needed and estimated hours.)*

Approved

Denied

Conditions of Approval and Compensation details: *(Please include any adjustments to the request, including approved hours (if applicable), and any special compensation circumstances.)*

This employee has been approved for Extra Service and will be compensated based on the approved terms. Any alteration to the work required beyond what is approved in this agreement should be submitted on an additional form. It is the responsibility of the employee to record their hours, and the supervisor to review and approve.

Requesting Supervisor's Signature:

Date

Employee Signature:

Date

Human Resources Signature:

Date

Vice President Signature:

Date

Mountainland Technical College is an at-will employer, meaning either party, with or without notice, with or without cause, may terminate employment. Nothing in the Extra Service/Overload Compensation Policy or this form shall create an expectation of continued employment.