

MILLINOCKET SCHOOL DEPARTMENT

COMP TIME APPROVAL AND REPORT OF HOURS

All comp time requires prior approval of the Superintendent of Schools, must be used within 26 pay periods, and cannot be accumulated over 160 actual hours.

EMPLOYEE'S NAME: _____ TODAY'S DATE: _____

HOURS OF COMP TIME REQUESTED TO ADD: _____

HOURS OF COMP TIME REQUESTED TO USE: _____

REASON FOR COMP TIME ADDITION/USE REQUEST:

RECORD OF COMP TIME

Number of hours of Comp Time as of today's request _____

Addition of Hours + _____

Use of Hours - _____

TOTAL REMAINING HOURS OF COMP TIME AS OF TODAY _____

Employee's Signature Date

Superintendent's Approval Date

For Office Use:

Copies: Bookkeeper _____ Central Office _____ Employee _____