## **RESA IV PROFESSIONAL PERSONNEL ALTERATION IN SCHEDULE**

## PART 1

(To be completed & given to Executive Director/Designee for approval)

Any alteration in schedule shall be requested and approved in advance per RESA IV policy. If for some reason, the excess time is not worked as planned, this form is void.

I respectfully request approval for working in excess of the regular schedule. I understand that work in excess of the regular schedule and any alteration in said schedule is hour for hour. I plan to work:

Estimated	Date	/Time·
LSUIIIateu	Date	/ ו ווווכ.

Purpose:

Employee Signature	Date

## PART 2

(Executive Director/Designee completes & returns to employee)

Approved:	Not Approved:
Comments:	
Executive Director/Designee Signature	Date

## PART 3

(To be completed after approved & earned. A copy of this form will be filed with employee timesheet)

I would like to request	as the date I would
like to use for hours worked in excess of the reg	ular schedule.
Initials of Executive Director/Designee	Date