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| **Overtime Request Form** |
|  **Date\*：** |
| **Requester\*** |  | **Department\*** |  |
| **Overtime Reason\*** |  |
| **Overtime Type \*** |  |
| **Overtime Start Date \*** |  | **Overtime End Date \*** |  |
| **Overtime Duration \*** |  **Hours** |
| **Remarks**  |  |