

U.S. DEPARTMENT OF AGRICULTURE  
RURAL DEVELOPMENT  
**REQUEST FOR OVERTIME**

Form RD 2051-6  
(5-10-84)

1. REQUESTING UNIT		2. REQUESTING OFFICER				DATE	3. LOCATION OF UNIT	
NAME OF EMPLOYEE	GRADE	FLSA STATUS ("X" if applicable)		PAYING STATUS (Employee's Initial)		NO. OF HOURS	PAY PERIOD	PROPOSED SCHEDULE FOR OVERTIME WORK AND LOCATION
		Exempt	Non Exempt	Overtime Rate	Comp Time Off			
(4)	(5)	(6)		(7)		(8)	(9)	(10)
11. JUSTIFICATION: <i>(Give complete explanation of need for overtime work)</i>								
12. TRAVEL STATUS:						13. PERSONNEL USE ONLY		
<input type="checkbox"/> ONE DAY ASSIGNMENT <input type="checkbox"/> MULTIPLE DAY ASSIGNMENT (OVERNIGHT STAY) <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER						<input type="checkbox"/> FLSA ONLY <input type="checkbox"/> TITLES 5 <input type="checkbox"/> BOTH FLSA & TITLE 5		
14. APPROVING OFFICIAL: <i>(Signature &amp; Title)</i>				<input type="checkbox"/> REQUEST IS AUTHORIZED IN FULL <input type="checkbox"/> REQUEST DISAPPROVED <input type="checkbox"/> REQUEST IS GRANTED SUBJECT TO MODIFICATION AS FOLLOWS:		DATE OF APPROVAL		
						RD 2051-06 (5-10-84)		

This request may be used to obtain approval for overtime as authorized in RD Instruction 2051-H. Whenever possible, overtime shall be approved in advance.

- PROCEDURE FOR PREPARATION : RD Instruction 2051-H.
- PREPARED BY : Official requesting overtime.
- NUMBER OF COPIES : Original and two copies.
- SIGNATURES REQUIRED : Supervisor and approving official.
- DISTRIBUTION OF COPIES : Approving official and file with office copy of T&A.