

Blue Ridge Community and Technical College

Over-time and Holiday Work

Request Form

1. Name of Student Employee:

2. The Student Employee is requested to work: (Please circle one)

Over-time

or

Holiday time

3. Dates and times that the above named Student Employee is requested to work
Over-time or Holiday time: (Be specific)

4. Reason why student is requested to work over-time or on a College observed Holiday:

5. Is the presence of the above named Student Employee necessary for the basic operation
of business?

Yes

or

No

Supervisor Signature: _____ Date: _____

For Human Resources Office Use Only

Date Request Form Received: _____

Request Approved or Denied: _____