

# Overtime Claim Form

This **overtime claim form sample** provides a clear and organized layout to accurately report detailed hours worked beyond regular shifts. It ensures that all extra time is properly documented for compensation and approval. Using this form helps maintain transparency and efficient payroll processing.

## Employee Details

Employee Name		Employee ID	
Department		Position	

## Overtime Details

Date	Regular Shift	Overtime Start	Overtime End	Total OT Hours	Reason for Overtime
2024-06-01	09:00 - 17:00	17:15	19:30	2.25	Project deadline
2024-06-02	09:00 - 17:00	17:05	20:00	2.92	System upgrade

Total OT Hours Claimed:	
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Employee Signature		Date	
Supervisor Approval		Date	