

Becky Herrin

From: Renette Arael
Posted At: Thursday, October 25, 2001 1:06 PM
Conversation: COMP BANK
Posted To: FORMS

Subject: Comp Bank Form

COMPENSATORY BANK PROGRAM
MEMORANDUM OF UNDERSTANDING
(Law Enforcement and Detention Members Only)

I, _____ DO DO NOT (Circle One) agree to participate in the Compensatory Bank Program in lieu of monetary overtime compensation, at a rate of one-half hours of compensatory time for each hour of overtime worked.

I understand I may accumulate up to forty-eight (48) hours of compensatory time during any twenty-eight day work period. Since compensatory time is accumulated at time and one-half, this is only thirty-two (32) hours of actual overtime worked.

I understand that any compensatory time earned in excess of the forty-eight (48) hours will be paid and must be pre-approved by your supervisor.

Signature Date

MEMORANDUM OF UNDERSTANDING
(Civilian Members)

I, _____ DO DO NOT (Circle One) agree to participate in the compensatory time off program in lieu of monetary overtime compensation, at a rate of one and one-half hours of compensatory time for each hour of overtime worked.

I understand I may accumulate up to thirty-one and one-half (31.5) hours of compensatory time during any seven (7) day work period. Since compensatory time is accumulated at time and one-half, this is only twenty-one (21) hours of actual overtime worked.

I understand any compensatory time earned in excess of the thirty-one and one-half (31.5) hours allowed will be paid and must be pre-approved by your supervisor.

Signature Date

Added to Compensatory List

By Date

xc
Division Commander

