

**WEST VIRGINIA JUDICIARY  
COMPENSATORY TIME RECORD**

Name: \_\_\_\_\_ Office Location: \_\_\_\_\_

**Section 1: ADVANCE APPROVAL TO WORK OVERTIME OR ON A HOLIDAY**

Date Submitted: \_\_\_\_\_

The above-named employee is authorized to work \_\_\_\_\_ hour(s) or \_\_\_\_\_ day(s)

Overtime    Holiday   on \_\_\_\_\_  
Date(s)

Submitted by: \_\_\_\_\_  
Signature of Employee

Reviewed by: \_\_\_\_\_  
Signature of Supervisor

Approved by: \_\_\_\_\_  
Signature of Administrative Director or Designee

Advance approval for overtime is required.

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**Section 2: STATEMENT OF COMPENSATORY TIME EARNED**

Date Submitted: \_\_\_\_\_

Compensatory Time Earned:

Overtime: \_\_\_\_\_ hour(s) on \_\_\_\_\_  
Date(s)

Holiday: \_\_\_\_\_ day(s) or \_\_\_\_\_ hour(s) on \_\_\_\_\_  
Date(s)

Submitted by: \_\_\_\_\_  
Signature of Employee

Reviewed by: \_\_\_\_\_  
Signature of Supervisor

Approved by: \_\_\_\_\_  
Signature of Administrative Director or Designee

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Date entered in location leave records: \_\_\_\_\_

Statements of Compensatory Time must be submitted no later than the week following the work week in which the overtime was earned.