**Overtime Pay or Compensatory Time Election, LMC Model Form**

*League staff thoughtfully develops models for a city’s consideration. Models should be customized as appropriate for an individual city’s circumstances in consultation with the city’s attorney. Helpful background information on this model may be found in the* [*City Employment Basics*](https://www.lmc.org/resources/hr-reference-manual-chapter-1-city-employment-basics/) *chapter of the HR Reference Manual.*

**This icon marks places where the city must customize the model. They offer additional provisions, optional language, or comments for your consideration. The icon, and language you do not wish to include, should be deleted from this model before use. Make other changes, as needed, to customize the model for your city.**

**\_\_\_\_\_\_\_** **Overtime Pay or Compensatory Time Election**

**For 20****Calendar Year**

*Insert name of City Comp Time Program*

The undersigned employee is a participant (“Participant”) in the \_\_\_\_\_\_\_ (the “Program”) and, at the time of this election, is expected to work overtime and be eligible for compensatory time under the Program in 20. The Participant wishes to make an irrevocable election to receive compensatory time in lieu of overtime pay for overtime hours worked in 20 subject to the following limitations \_\_\_\_\_\_\_. The number of hours the Participant may elect to receive as compensatory time under this election shall not exceed \_\_\_\_\_\_\_.

*In the first sentence insert name of City Comp Time Program. The employee completes the blank in the second sentence if the City’s program allows elections other than on an all or nothing basis. For example, if allowed under the Program, an employee could split the overtime hours earned between overtime pay and comp time or could elect to receive comp time up to a certain amount of hours, after which he/she would receive overtime pay). Insert the limit (if any) in the last sentence; otherwise delete that sentence if no limit applies.*

This election, once made, is irrevocable. The Participant will not be permitted to receive overtime pay for the hours the Participant has elected to receive as compensatory time pursuant to this election.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARTICIPANT

 [Insert Participant’s Name]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Insert Participant’s signature]