

Election Project Request Form (for overtime only)

Name Title			Payroll Number
			Department
Phone Number		nber	Email
Please	e ansv	wer the below:	
Yes	No	Qualifiers	
		Must be available for the duration of the project (schedule will be arranged through the Commissioner's office)	
		Able to work the hours required on overtimeWilling to perform administrative and support tasks as neededAble to get to the assigned work location	
		Able to perform regular Aviation assigned hours	

All the above answers must be **yes** to participate, along with your manager's signature of approval.

Employee Signature:	Date
Manager Signature:	Date

Completed forms must be submitted, via email, to <u>Staffing@phl.org</u> no later than **October 6, 2020**.

HR Staff Only

City Commissioner's Office Notified_____

Timesheet requirements Oracle or Timesheet