

forward together \cdot saam vorentoe \cdot masiye phambili

Department:				OVERTIME FORM Month/Year:			
Employee Number	Employee Name	Cost of Employment (Employee Salary)	Overtime Hours (Mondays - Saturdays) x1.5	Overtime Hours (Sunday/ public holidays) x2	Overtime Hours (security staff) x0.5	Costing Information	*Motivation for Overtime exceeding BCEA rules
Total							
	ust be provided for emp		nder the BCEA t	hreshold and the	claim exceeds	the overtime rules.	
EmployOvertin	ideration (based on the layees may work a maximum ne remuneration for Mondane pay is subject to an ann	n of 3 hours overtime ays till Saturdays is	paid at 1.5x norm	al rate, 2x normal r	eek. ate for Sundays a	and public holidays and	0.5x for Sundays for Security staff.
Approval:	Head of Departmen	t (name)	_		Signature		 Date
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