

Overtime Work Policy Acknowledgment

Date: [Insert Date]

Employee Name: [Insert Employee Name]

Employee ID: [Insert Employee ID]

Department: [Insert Department]

Manager/Supervisor: [Insert Manager/Supervisor Name]

Dear [Employee Name],

This letter serves as a formal acknowledgment of your understanding of the company's overtime work policy. As an employee of [Company Name], you are expected to adhere to the following guidelines regarding overtime work:

- All overtime must be pre-approved by your manager/supervisor.
- Overtime will be compensated at a rate of [insert rate] per hour.
- Employees must submit an overtime request form prior to engaging in overtime work.
- Excessive overtime may be monitored and addressed by management.

By signing below, you acknowledge that you have read and understood the overtime work policy and agree to adhere to its guidelines.

Employee Signature: _____

Date: _____

Manager/Supervisor Signature: _____

Date: _____

Thank you for your attention to this important policy.

Sincerely,

[Your Name]

[Your Title]

[Company Name]