



University of Fort Hare
Together in Excellence

University of Fort Hare

Human Resources Department

Private Bag X 1314; Alice; 5700; Republic of South Africa
Telephone (040) 602 2256 Fax (040) 653 1023

OVERTIME CLAIM FORM

This form must be accompanied by an approved authorisation form for it to be approved and defined in BCEA) and 3hrs overtime per day. Kindly note that employees who earn more than R115 572.00 per annum are not entitled to overtime pay.

Overtime payable for the month of (mm/yyyy): _____

Name: _____ Employee No.: _____

Designation: _____ Annual Salary: _____

Date Worked	Day of the Week	Time worked (from - to)	Total Hours Worked	Reasons

Signature of Applicant: _____

Date: _____

Endorsed by (Head): _____

Date: _____

Endorsed by (Campus Director): _____

Date: _____

Checked for Compliance by H.R.: _____

Date: _____

Approved/ Not approved by Registrar: _____ Date: _____