



Imperial Valley College

REQUEST for Payout of Unused Compensatory Time

Date: _____

To: Human Resources/Payroll

From: _____

Per Article 14.9 of the IVC CSEA Contract, I am requesting the following comp time hours be paid out:

No. of hours _____

Payroll Date _____

Employee Signature

Date

Supervisor Signature

Date

----- For Office Use Only -----

Verification of hours available

Yes ___ No ___

HR Analyst Signature

Processed by Payroll Coordinator:

Date

Initial