

Overtime Refusal / Callout Refusal Reporting Form

Date Worked:	Feb 28 & 29 S2 Contractor coverage
Person Worked	See Below
Work Order No.	

Date Requested	Persons Called Out or Requested to Work Overtime (in order requested)	Refusal (note time refused)	Accepted (note time accepted)	Not Available (note time called)	No Answer (note time called)	Hours Chg		Reason For Callout	Performed position tasks without assistance Yes / No
						OT	DT		
Feb 26	G Phillips	06:00							
	A Petrie	18:00							
	C Quaife	06:00						Contractor coverage	Yes
	J Dakus	18:00						Contractor coverage	Yes
	G Hubick	06:00						Contractor coverage	Yes
	A Wilson	06:00						Contractor coverage	Yes
	T Jespersen (28 th)		06:00					Contractor coverage	Yes
	M Terney	06:00						Contractor coverage	Yes
	TJ Rideout (28 th)		06:00					Contractor coverage	Yes
	A Wyrozub (Both)		18:00					Contractor coverage	Yes
	J Stankey			Vacation				Contractor coverage	Yes
	J Kaiser (Both)		18:00					Contractor coverage	Yes

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	R Stuparyk	18:00		Medical				Contractor coverage	Yes
	C Pham (29th)		18:00					Contractor coverage	Yes
	N Kaiser (29th)		18:00					Contractor coverage	Yes
									Yes
									Yes
									Yes
									Yes
									Yes
									Yes

This form is to be completed on each occasion that overtime or a callout is worked or refused by an employee.

Supervisor S Brain/B Hitchcock