

# Overtime Refusal / Callout Refusal Reporting Form

Sheet 1 of 1

|                |                             |
|----------------|-----------------------------|
| Date Worked:   | January 15, 2025 S2 Utility |
| Person Worked  |                             |
| 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 |                      |  |
| Jan 13         | J Dakus   | 09:40                       |                               |                                  |                              |           |    | Cover A crew utility | Yes  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |
|                |   |                             |                               |                                  |                              |           |    |                      |  |

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

Supervisor B Hitchcock

Distribution: Supervisor / R. Skinner