



THE STEPPING STONES GROUP
Transforming Lives Together

ADDITIONAL HOURS & OVERTIME POLICY

According to your employment agreement, you are scheduled to work a set number of hours per day. Depending on the client, the number of hours will vary. The hours per day may vary from time to time due to a change in school calendar, weather, sickness, etc. Unless one of these items have occurred, you are expected to work as scheduled per your employment agreement and record your time accordingly on your timecard.

From time to time, the client may ask you to work outside your scheduled hours. Additional Hours and/or Overtime is not permitted without prior written approval from the client. Please note that you should not work any additional hours or overtime hours if you have not first obtained written authorization. If the client is unwilling to provide written consent, please contact your Recruiter or Clinical Manager immediately for assistance in resolving the situation.

The below form must be completed and submitted to FINANCE.INVOICES@SSG-HEALTHCARE.COM, your Recruiter or Clinical Manager and Timecard Approver. It is preferred that written consent for additional hours and/or Overtime be submitted prior to the actual hours worked but not later than the corresponding payroll deadline.

In the event the supervisor has emailed you their approval and did not sign the form, please forward the form along with the email.

If you have any questions, please contact your Recruiter or Clinical Manager.



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OVERTIME/ADDITIONAL HOURS APPROVAL FORM

| | |
|--|--|
| Employee Name: | |
| Date: | |
| Hours OT Worked: | |
| Purpose: | |
| Employee Signature: | |
| Authorized Client Representative Name (print/type): | |
| Authorized Client Representative Signature: | |
| Client Name/School: | |

SUBMIT COMPLETED FORM TO FINANCE.INVOICES@SSG-HEALTHCARE.COM, YOUR RECRUITER OR CLINICAL MANAGER AND TIMECARD APPROVER.

PLEASE CALL YOUR RECRUITER OR MANAGER WITH QUESTIONS.