

STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
DIVISION OF STATE POLICE

HCP OR OPA PROJECT OVERTIME REPORT

(card must be submitted in less than three (3) days)

Last Name:	ID Number:	First Name:	Employee Number:	Troop/Unit/Assignment:	Date Worked:
Connecticut State Police Project Number and Company Name:					
HOURS WORKED Use 24 Hour Time			Complete the information below <u>ONLY</u> if job was swapped or split between two (2) employees:		
Use 24-hour time.	<u>Start Time</u>	<u>End Time</u>	<u>Hours</u>	PLEASE NOTE: NOTICE OF ASSIGNMENT SWAP MUST BE SUBMITTED TO THE SPECIAL DUTY OFFICE VIA EMAIL AND THE SWAP MUST BE COMPLETED IN KRONOS PRIOR TO THE <u>DATE</u> OF THE ASSIGNMENT TO BE WORKED. A SPLIT ASSIGNMENT CAN ONLY BE BETWEEN 2 EMPLOYEES (SO#2001-01 4/29/11)	
GP to Site:				For Swap or Split Assignments ONLY:	Originally Assigned To – Name and Badge #:
Hours Worked:					Split With – Name and Badge #:
GP from Site:					
Total Hours: Note: Enter ½ hour GP for standard jobs or up to and including 1 hour GP for qualifying Troop H or Troop G jobs. It is suggested that Trooper maintain documentation for over ½ hour GP payments.			Complete the information below <u>ONLY</u> if job was not assigned by the Special Duty Office:		
			Town of Assignment:		
			Location of Assignment:		
			Type of Assignment:		<input type="checkbox"/> Local Control <input type="checkbox"/> Emergency <input type="checkbox"/> Other:
			How You Received the Assignment:		<input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> MDT Troop:
			Name and Badge # of Assigning Supervisor:		
Narrative Report:					
Text					
Submitting Trooper's regular chain of command Supervisor's Name and Badge Number (print):				Company Timekeeper / Authorized Agent Name (print):	
Submitting Trooper's Signature:				Company Timekeeper / Authorized Agent Signature	

SUBMIT FORM VIA THE INSTRUCTIONS ON THE DESPP KRONOS INTRANET PAGE.

Review A&O Manual Section 4.7.5 for compliance. Show travel time to project site, hours spent at project site, and travel time from project site (see above note)). If project assignment is cancelled with less than 24 hours of notice to the Department, show the start time and enter 4 hours in the "Total Hours" box. Complete the "Narrative Report" for all escort assignments, split assignments, assignments over 18 hours in a 24 hour period, or other noteworthy event. Submit this form via email to HCPOPA.OTReport@ct.gov.