

OFFICIAL TIME REQUEST FORM

PART I. Request for Official Time for Representational Activities

Representative Name (Print)

Organization and Duty Phone

Date and Time of Business

Destination

Estimated Time

Representative's Signature

Date

Approved [] Disapproved [] Reason Disapproved _____

Supervisor's Signature

Date

PART II. Purpose for Official Time

Hours used	Actual time left	Actual time returned
_____	Contract Negotiations-Term Bargaining	(Time Card Code: BA)
_____	Mid-term Bargaining	(Time Card Code: BB)
_____	On going Labor/Management Relations	(Time Card Code: BD)
	___ Training	
	___ Partnership	
	___ Other	
_____	Grievances & Appeals	(Time Card Code: BK)
	___ Grievance/Arbitration	
	___ MSPB Appeals	
	___ FLRA Proceedings	
	___ Other	
_____	Total Hours charged	
	(Rounded to nearest Hour)	

NOTE: Time Card code is annotated
in "Nt/Haz/Oth" Field

Issue:

Union Rep. Initials & Date: _____ Supv. Initials & Date: _____