



# OVERTIME REQUEST FORM

BU/BR/DIV Name :  
 Department Name :  
 Reason for Overtime :

3၁၆၃၀၊ ၆၃၅ + ၃၁၆၇၅၊ ၂၀၁၇၀၆ OT

No.	Date	Name	Position Level	Time		Hours	Amount	Remark	
				From	To				
1	1.4.25	Ukyi Moe	S						
2	5.4.25	"	S	17:00	07:00	1N	8000	3၁၆၃၀၊ ၆၃၅ OT	
3	7.4.25	"	S	"	"	1N	8000	" OT	
4	9.4.25	"	S	07:00	17:00	DI	8000	" OT	
5	13.4.25	"	S	17:00	07:00	1N	8000	3၁၆၃၀၊ ၆၃၅ OT	
6	13.4.25	"	S	07:00	17:00	DI	8000	3၁၆၇၅၊ ၂၀၁၇၀၆ OT	
7	14.4.25	"	S	17:00	07:00	1N	8000	3၁၆၃၀၊ ၆၃၅ OT	
8	15.4.25	"	S	"	"	1N	8000	3၁၆၇၅၊ ၂၀၁၇၀၆ OT	
9	17.4.25	"	S	"	"	1N	8000	" OT	
						DI	8000	" OT	
Total Hours									
Total Amount								72000	

Requested by  
 Sign : *[Signature]*  
 Name : Ukyi Moe.  
 (Requestor)

Approved by  
 Sign : *[Signature]*  
 Name : Ukyi Moe.  
 (DH)

Approved by  
 Sign : *[Signature]*  
 (GM/AGM/COO)

Checked by  
 Sign : *[Signature]*  
 Name : Thee Nu Wei  
 (HR)

05-CHL-HRM-FRM-020-05



# OVERTIME REQUEST FORM

BU/BR/DIV Name :  
 Department Name :  
 Reason for Overtime :

3၁၆၃၀၊ ၆၃၅ + ၃၁၆၇၅၊ ၂၀၁၇၀၆ OT

No.	Date	Name	Position Level	Time		Hours	Amount	Remark	
				From	To				
1.	17.4.25	Ukyi Moe	S	17:00	07:00		8000	3၁၆၃၀၊ ၆၃၅ OT	
2	19.4.25	"	S	07:00	17:00		8000	၆၃၀၅၆၆ : OT	
3	19.4.25	"	S	17:00	07:00		8000	3၁၆၇၅၊ ၂၀၁၇၀၆ OT	
4	18.4.25	"	S	"	"		8000	" OT	
5	21.4.25	"	S	07:00	17:00		8000	" OT	
6	21.4.25	"	S	17:00	07:00		8000	3၁၆၃၀၊ ၆၃၅ OT	
7	25.4.25	"	S	"	"		8000	" OT	
8	29.4.25	"	S	"	"		8000	" OT	
Total Hours								64000	
Total Amount									

Requested by  
 Sign : *[Signature]*  
 Name : Ukyi Moe.  
 (Requestor)

Approved by  
 Sign : *[Signature]*  
 Name : Ukyi Moe.  
 (DH)

Approved by  
 Sign : *[Signature]*  
 (GM/AGM/COO)

Checked by  
 Sign : *[Signature]*  
 Name : Thee Nu Wei  
 (HR)

05-CHL-HRM-FRM-020-05



# OVERTIME REQUEST FORM

BU/BR/DIV Name :

Department Name :

Reason for Overtime : အိမ်အားဖြည့် + အစိုးရရုံးပိတ်ရက် OT

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1	1-4-25	UTint Swe	S	07:00	17:00	D1	8000	အိမ်အားဖြည့် OT
2	4-4-25	"	S	"	"	D1	8000	အိမ်အားဖြည့် OT
3	12-4-25	"	S	"	"	D1	8000	" OT
4	13-4-25	"	S	17:00	07:00	1N	8000	အစိုးရရုံးပိတ်ရက် OT
5	15-4-25	"	S	07:00	17:00	D1	8000	" OT
6	16-4-25	"	S	"	"	D1	8000	အိမ်အားဖြည့် OT
7	16-4-25	"	S	17:00	07:00	1N	8000	အစိုးရရုံးပိတ်ရက် OT
8	17-4-25	"	S	07:00	17:00	D1	8000	အိမ်အားဖြည့် OT
9	17-4-25	"	S	17:00	07:00	1N	8000	အစိုးရရုံးပိတ်ရက် OT
Total Hours							72000	
Total Amount								

Requested by

Approved by

Approved by

Checked by

Sign :  
Name : U Kyi Moe.  
(Requestor)

Sign :  
Name : U Kyi Moe.  
(DH)

Sign :  
(GM/AGM/COO)

Sign :  
(HR) Moe Ue Ue

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# OVERTIME REQUEST FORM

BU/BR/DIV Name :

Department Name :

Reason for Overtime : အိမ်အားဖြည့် + အစိုးရရုံးပိတ်ရက် OT

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1	19-4-25	UTint Swe	S	07:00	17:00	D1	8000	အစိုးရရုံးပိတ်ရက် OT
2	20-4-25	"	S	"	"	D1	8000	အိမ်အားဖြည့် OT
3	20-4-25	"	S	17:00	07:00	1N	8000	အစိုးရရုံးပိတ်ရက် OT
4	21-4-25	"	S	"	"	1N	8000	" OT
5	24-4-25	"	S	07:00	17:00	D1	8000	အိမ်အားဖြည့် OT
6	28-4-25	"	S	"	"	D1	8000	" OT
Total Hours							48000	
Total Amount								

Requested by

Approved by

Approved by

Checked by

Sign :  
Name : U Kyi Moe.  
(Requestor)

Sign :  
Name : U Kyi Moe.  
(DH)

Sign :  
(GM/AGM/COO)

Sign :  
(HR) Moe Ue Ue

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# OVERTIME REQUEST FORM

BU/BR/DIV Name :

Department Name :

Reason for Overtime : အိမ်အားဖြည့် + အစိုးရရုံး၊ ဝါထက် OT

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1	2.4.25	U Myint Thawng	S	17:00	07:00	1N	8000	အိမ်အားဖြည့် OT
2	6.4.25	"	S	"	"	1N	8000	" OT
3	8.4.25	"	S	07:00	17:00	D/	8000	" OT
4	10.4.25	"	S	17:00	07:00	1N	8000	" OT
5	14.4.25	"	S	07:00	17:00	D/	8000	အစိုးရရုံး၊ ဝါထက် OT
6	14.4.25	"	S	17:00	07:00	1N	8000	အိမ်အားဖြည့် OT
7	15.4.25	"	S	"	"	1N	8000	အစိုးရရုံး၊ ဝါထက် OT
8	16.4.25	"	S	"	"	1N	8000	" OT
9	18.4.25	"	S	"	"	1N	8000	" OT
<b>Total Hours</b>								
<b>Total Amount</b>								72000

Requested by  
 Sign : *Kyi*  
 Name : U Kyi Moe  
 (Requestor)

Approved by  
 Sign : *Kyi*  
 Name : U Kyi Moe  
 (DH)

Approved by  
 Sign : *[Signature]*  
 (GM/AGM/COO)

Checked by  
 Sign : *[Signature]*  
 (HR) Thae Nee Kela

05-CHL-HRM-FRM-020-05



# OVERTIME REQUEST FORM

BU/BR/DIV Name :

Department Name :

Reason for Overtime : အိမ်အားဖြည့် + အစိုးရရုံး၊ ဝါထက် OT

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1	19.4.25	U Myint Thawng	S	07:00	17:00	D/	8000	အိမ်အားဖြည့် OT
2	19.4.25	"	S	17:00	07:00	N	8000	အစိုးရရုံး၊ ဝါထက် OT
3	18.4.25	"	S	"	"	N	8000	အိမ်အားဖြည့် OT
4	20.4.25	"	S	"	"	N	8000	အစိုးရရုံး၊ ဝါထက် OT
5	22.4.25	"	S	"	"	N	8000	အိမ်အားဖြည့် OT
6	26.4.25	"	S	"	"	N	8000	" OT
7	30.4.25	"	S	"	"	N	8000	" OT
<b>Total Hours</b>								
<b>Total Amount</b>								56000

Requested by  
 Sign : *Kyi*  
 Name : U Kyi Moe  
 (Requestor)

Approved by  
 Sign : *Kyi*  
 Name : U Kyi Moe  
 (DH)

Approved by  
 Sign : *[Signature]*  
 (GM/AGM/COO)

Checked by  
 Sign : *[Signature]*  
 (HR) Thae Nee Kela

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