Backfill/Overtime Request

● Request for training must be submitted 30 days before the course begins to the CA TF-4 Office.

● Request for Project Compensation must be submitted before the project begins to the CA TF-4 Office.

Directions:

- Submit <u>completed</u> form to the CA TF-4 Office for approval.
- Final Approval/Disapproval will be returned to you within 7 working days.
- All receipts are to be forwarded to your home agency for processing (30 days to CA TF-4 Office).
- Upon completion of a training course student is required to submit a Course Review Form to the CA TF-4 Office and may be required to submit copies of all course materials.

Name of Course/Project Number_____

Course Sponsor / Project Manager USAR-TF4_____ Location_____

Dates of Course/Project_____ Travel to Date_____ Travel Return Date_____

Purpose of Course_____

_____

_____

Estimate of cost to CA TF-4:

Tuition____Course Materials_____Travel_____Lodging_____Per Diem_____   **Total_____**

Name_____Task Force Position_____

Address_____

City_____State_____Zip_____

Phone_____email_____

"Backfill" requested for On-Duty Training Days* or Overtime requested for Off-Duty Project Days:

Dates	Hours	Dates	Hours	Dates	Hours
_____	From___To	_____	From___To	_____	From___To
_____	From___To	_____	From___To	_____	From___To

Home Agency_____Agency Approval_____Date

<small>3-letter ID   Agency Representative Signature</small>

* Note: CA TF-4 does not pay Overtime for Training

For CA TF-4 Program Office use only:

CA TF-4 has Approved / Disapproved for reimbursement to member's agency for:

- ☐ Travel Expense
- ☐ Lodging Expense
- ☐ Per Diem
- ☐ Course Registration/ Course Materials
- ☐ Overtime approved for Instruction or Projects ONLY
- ☐ "Backfill" for "On-Duty" days of course and travel days

Other Instructions_____

_____

Name_____**Position**_____

Signature_____Date_____

Backfill/Overtime Log

Date	Hours	Name of person paid overtime	Hrly Rate & Step	Rank	SS#

The Backfill/Overtime Log is used to track the cost associated with the individual that has been approved to work on a project for CA TF-4 or attend training that requires "Backfill" for duty days.

Overtime is <u>not</u> allowed for attending training but, may be approved for CA TF-4 projects.

Instructions:
- **Date** is the day of the overtime occurrence.
- **Hours** is the total hours that required overtime or backfill.
- **Name of the person paid overtime** is the individual that is receiving overtime pay. If the individual on the front side of this form is receiving overtime for a project, list their name. If personnel are 'backfilling' for a CA TF-4 member on a special project or training assignment, list each person working the overtime created by the project or training assignment.
- **Rank** is the pay grade of the position according to the Participating Agency Salary Table.
- **SS#-** DHS/FEMA requires the Social Security Number of any individuals that are paid or reimbursed by FEMA funds.

Any additional expenses are to be submitted on the *PERSONNAL EXPENSE REIMBURSEMENT CLAIM* (form # PE-8)

A copy of this form is required to be submitted with invoice for reimbursement by Participating Agencies.