



**STATEMENT OF AGREEMENT OR UNDERSTANDING**  
**Classified Employee Compensation for Overtime Work**

I, \_\_\_\_\_, understand that as an agency of the State of Louisiana, Delgado Community College, has the option of granting compensatory leave for overtime hours worked.

**NON-EXEMPT EMPLOYEES:** In cases where the Fair Labor Standards Act applies, such leave will be credited to non-exempt employees at the rate of one and one-half hour for each hour worked. For overtime hours worked during weeks when leave is taken (with or without pay), or when holidays are observed, Delgado may opt to use straight-time cash payments or hour-for-hour compensatory leave to compensate non-exempt employees, in accordance with the Rules of the Department of State Civil Service.

**EXEMPT EMPLOYEES:** Delgado has the option of granting no overtime compensation at all to exempt employees; but if the College chooses to compensate exempt employees for overtime, Delgado may choose to compensate such employees with compensatory leave rather than cash payment.

**PAYMENT OF COMPENSATORY LEAVE UPON SEPARATION:**

- **NON-EXEMPT EMPLOYEES:** I also understand that non-exempt employees shall be paid upon separation for any time and one-half compensatory leave earned for overtime, as required by the Fair Labor Standards Act. Other straight, hour-for-hour compensatory leave shall be paid upon separation in accordance with Civil Service Rule 21.12.
- **EXEMPT EMPLOYEES:** Compensatory leave credited to exempt employees may or may not be paid upon separation in accordance with the applicable Civil Service Rules. Any such compensatory leave that is not paid, shall be cancelled, in accordance with the applicable Civil Service Rules.

I have read the above and agree to accept compensatory leave as compensation for overtime work.

Printed or Typed Name of Classified Employee: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date \_\_\_\_\_