

**Opinion** 

## **Star Human Resource Services Group**

Toppers HR Services (Pvt) Ltd. Star HR Services (Pvt) Ltd. ABO Brothers (Pvt) Ltd. Akram & Sons Friends Enterprises

Date:

## **Wee-hours Allowance Application Form**

Date to Apply:	Day:					
	Applicant Information					
Name		STAR HRSG ID:		Dept/Project		
Work Information & Approval						
Reason for						
wee-hours						
work						
Wee-hours	Start time: End time:					
work Plan	Work Place:					
Actual Overtime Record & Witness & Approval						
Actual	Work Time amount to:(Hours), FromTo					
wee-hours	Rest Time amount to:(Hours), FromTo					
work time						
	Effective wee-hours work time: (Hours)					
Supervisor's		Signature v	vith		Date:	
Opinion	111 66	ID III	41 4 41 1	•		
Note: 1. Your wee-hours work time will be effective on condition that this work is agreed by your supervisor in advance and approved in 24 hours after completed this work and the form should be submitted to Regional coordinator in time after approved. During						
11:00pm-6:00am, continue work more than 3hrs, can claim one time, each time 10\$. No more than 10 times/ month.						
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Actual	Work Time amount to:(Hours), FromTo					
wee-hours	Rest Time amount to:(Hours), FromTo					
work time						
processor security open at the establishmen and security				ee-nours work	ume:	(Hours)
Supervisor's		Signature v	vith		Data	

ID