

**CITY OF TURLOCK
PROHIBITING OFF-THE-CLOCK WORK POLICY**

Non-exempt and hourly employees shall report all hours worked.

The City prohibits work outside of regular work hours, unless prior approval has been obtained from the Director or designee. Absent such approval, employees shall not perform uncompensated work off duty.

If an employee is required to respond to work-related inquiries outside of the employee's regular work hours, the City has an obligation to compensate the employee for all hours worked. Directors, managers, and supervisors shall not allow or require employees to work off the clock.

Without exception, any work performed after regular work hours, even if the work was not authorized, shall be documented and reported to the employee's supervisor on the next regular work day so the employee may be properly compensated for all hours worked. Employees who fail to report hours worked as set forth herein, including but not limited to, the use of their City-issued cell phones or City email for work-related purposes during off-duty hours, may be subject to disciplinary action.

The City of Turlock provides City-issued equipment, including cell phones, to employees where there is an operational necessity, as determined by the Department Director. Some City-issued cell phones also include access to City email. City-issued cell phones and email shall be used solely for City business purposes during working hours and consistent with the City's Policy Regarding the Use of City-Owned Equipment.

As part of my duties, I have been issued or given access to (check all that apply):

- City cell phone*
- City email*

From time to time my Director, or designee, may authorize me to respond to work-related inquiries outside of my normal work hours. I understand that it is my responsibility to track and report any time worked outside of my normal work hours the next regular work day. Further, I agree to adhere to the requirements set forth herein.

Normal work hours: ____ a.m. to ____ p.m., _____ through _____ .
(Enter days of week)

Print Employee Name

Employee Signature

Department

Date: _____

Print Supervisor Name

Supervisor Signature

Date: _____