



## WAIVER OF ADDITIONAL MONEY FOR HOLIDAY WORK

I am eligible for additional money if I am required to work during my regular working hours on any day observed by the State as a holiday. Between April 1 and May 15, 2016, I may waive my right to such additional money and choose to receive compensatory time off instead. If I previously waived my right to receive money for holiday work, I have until May 15, 2016 to cancel that decision and start receiving money again.

*I wish to change the way I am currently being paid for holiday work:*

- I am now receiving money; I wish to receive compensatory time off.
- I am now receiving compensatory time off; I wish to receive money.

I understand that this is the way I will receive holiday compensation from now on. I will not be able to change this decision until at least April 1, 2017, and it will continue this way unless I do change it during an open period in 2017 or later.

Name *(Please print)*: \_\_\_\_\_

Signature: \_\_\_\_\_

Agency: \_\_\_\_\_

Work Location: \_\_\_\_\_

NYS EMPLID: N \_\_\_\_\_

Negotiating Unit *(Check one)*:

- |   |  |
|---|--|
| <input type="checkbox"/> PBANYS – APSU  | <input type="checkbox"/> Council 82 – Security Supervisors |
| <input type="checkbox"/> CSEA – ASU     | <input type="checkbox"/> CSEA – ISU                        |
| <input type="checkbox"/> CSEA – OSU     | <input type="checkbox"/> CSEA – DMNA                       |
| <input type="checkbox"/> DC-37 – RRSU   | <input type="checkbox"/> NYSCOPBA – Security Services      |
| <input type="checkbox"/> PEF – PS&T M/C |  |

This form must be returned to the BSC Time & Attendance Unit **by close of business, May 15, 2016**, via email to [BSCTimeAdmin@ogs.ny.gov](mailto:BSCTimeAdmin@ogs.ny.gov) or by mail to:

OGS Business Services Center  
 Time & Attendance Unit  
 Building #5, W. Averell Harriman State Campus, 4<sup>th</sup> Floor  
 1220 Washington Avenue  
 Albany, NY 12226-1900