

Request for Department of Personnel and Budget Division Exception to Furlough Implementation

Executive branch agencies must receive prior approval from Department of Personnel and the Budget Division for an exception to the implementation of furloughs in accordance with the emergency regulation adopted on July 1, 2009. This includes requesting approval of an alternative plan to using at least 8 hours of unpaid furlough leave per month and paying overtime, call back pay, added regular pay, and standby pay in the same pay period as unpaid furlough. The *Request for Department of Personnel and Budget Division Exception to Furlough Implementation* form must be used to request this exception and approved by both Department of Personnel and the Budget Division. The completed form should be routed to Department of Personnel. Once Department of Personnel completes their review, they will route all approved forms to the Budget Division.

Agencies should allow 7-10 business days for a final determination by Department of Personnel and the Budget Division. Department of Personnel reviews requests to ensure agencies are in compliance with personnel rules and regulations established by Nevada Revised Statutes or the Fair Labor Standards Act. They also verify the request is technically correct. The Budget Division reviews the budgetary impact of the request.

Below is a description of the information required in each section of the form.

Header:

The header consists of the agency name, budget account, and information regarding the requested position(s). **Agencies must fill out a form for each class code** and may group positions on a request as long as all the information on the form applies to all the positions. Position control numbers (PCN) must be supplied with the request. Multiple PCNs may be included for a class code and if needed, agencies can attach a list of affected PCNs. Indicate if the positions are exempt or non-exempt under the provisions of the Fair Labor Standards Act and the Nevada Revised Statutes.

The legislatively approved class codes must be used on the request form, not the current incumbent's class code. In other words, the PSMT class code should be referenced.

Exception to 8 hours monthly, Overtime, Standby Pay, Call Back Pay, and/or Added

Regular Pay:

Indicate which exception applies to the request.

8 hours monthly furlough - An exception must be requested for an employee to take less than or more than 8 hours of unpaid furlough leave a month.

Overtime Compensation - An exception must be requested for overtime/comp-time occurring in the same pay period as unpaid furlough leave. **In no case will overtime/comp-time be granted in the same pay week as the unpaid furlough leave.**

Standby Compensation and Call Back Compensation - An exception must be requested for Standby pay and/or Call Back pay in the same pay period or pay week as unpaid furlough leave.

Added Regular Time (Part-time Employees only) – An exception must be requested for Added Regular Time when a part-time employee takes furlough leave and subsequently needs to work additional hours within the same pay period. A full-time employee is not eligible for Added Regular Time.

Please review the Department of Personnel’s website for Furlough Updates Frequently Asked Questions for examples of these types of situations. No matter the exception requested, full-time employees must still accrue 96 hours of furlough leave by the end of the fiscal year.

Effective and Expiration Date:

Indicate the start and end date for the exception request.

Main Purpose of the Position:

Briefly describe the main purpose of the position(s), including primary duties.

Describe agencies plan to reduce overall budget costs:

Provide the agency’s alternative plan to the implementation of furloughs as outlined by Department of Personnel. Attach any additional information to illustrate the plan and projected overall budget savings of the plan to meet the furlough savings.

Reason for Request & Consequences:

Provide the reason for the exception and potential impact if the exception is not approved.

Funding Source:

Provide the percentage of funding source for the position(s).

Agency Director Approval:

All requests must be approved by the agency’s director before being submitted to the Budget Division.

REQUEST FOR DEPARTMENT OF PERSONNEL AND BUDGET DIVISION EXCEPTION TO FURLOUGH IMPLEMENTATION

Agency Name: _____	Class Code #: _____	Exempt																			
Budget Account #: _____	Grade Level: _____	Non-Exempt																			
Position Control #: _____																					
Class Title: _____																					
Location of Position: _____																					
Name of Position Supervisor: _____		Telephone Number: _____																			
Requesting Exception of: <input type="checkbox"/> 8 hours monthly furlough <input type="checkbox"/> Overtime Compensation <input type="checkbox"/> Standby Compensation <input type="checkbox"/> Call Back Compensation <input type="checkbox"/> Added Regular Time (part-time employees only)		Start Date _____ End Date _____																			
Briefly describe the main purpose of this position: 																					
Describe the agencies plan to reduce overall costs equal to furlough savings: 																					
Please provide the reason for the exception request and consequences if exception is not approved: 																					
What is the position funding source?																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>General Fund:</td><td style="width: 20%;"></td><td style="text-align: center;">%</td></tr> <tr><td>Highway Fund:</td><td></td><td style="text-align: center;">%</td></tr> <tr><td>Federal Funds:</td><td></td><td style="text-align: center;">%</td></tr> </table>		General Fund:		%	Highway Fund:		%	Federal Funds:		%	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Fees:</td><td style="width: 20%;"></td><td style="text-align: center;">%</td></tr> <tr><td>Other Funding:</td><td></td><td style="text-align: center;">%</td></tr> <tr><td>Other Funding:</td><td></td><td style="text-align: center;">%</td></tr> </table>		Fees:		%	Other Funding:		%	Other Funding:		%
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Other Funding:		%																			
Other Funding:		%																			

AGENCY DIRECTOR APPROVAL:

_____ Title _____ Date _____

Agency Director

DEPARTMENT OF PERSONNEL APPROVAL:

Approved Exception Not Approved for Exception

_____ Date _____

Department of Personnel Approval

BUDGET DIVISION APPROVAL:

Approved Exception Not Approved for Exception

_____ Date _____

Budget Division Approval