REQUEST FOR DUAL EMPLOYMENT

SECTION I

Employee's Name: _____ ID#: _____

PRIMARY EMPLOYMENT Department Information		SECONDARY EMPLOYMENT Department Information	
Dept Name:		Dept Name:	
Job Title:			

Secondary employment work schedule including hours of work:

State the c(rit)a.1 1e-52/dsa6.3 (e)-D6.3 (E)0.6 (m)5.7 (p4.3 (l)-3.7 (o)-3.7 (y)-4.3 (m)-3.7 (e)-4.3 (n)-3.7 (t)-4.3 (u)-3.7 (E)-3.7 (T)-4.3 (C)-3.7 (f)-4.3 (o)-3.7 (r)-4.3 (m)-3.7 (.)-4.3 (1)-3.7 (6)-4.3 (7)-3.7 (9)-4.3 (u)-3.7 (-)-4.3 (6)-3.7 (.)-4.3 (3)-3.7 (()-4.3 (e)-3.7 ()-4.3 (:)-3.7 (1)-4.3 (1)

I certify that the requested part time dual employment request is not related to or a part of the position for which the employee was hired and will not interfere with the employee's normal working hours.

I understand that I am agreeing to a pre -determined regular pay rate as compensation for the secondary employment position I have accepted. The secondary emplo yment position is in a different occupational category from my primary position; it is conducted sporadically and/or infrequently and it is done on a voluntary basis.

_____	X_____	_____
(Print) Employee Name	Signature	Date
_____	X_____	_____
(Print) Primary Supervisor	Signature	Date
_____	X_____	_____
(Print) Secondary Supervisor	Signature	Date

SECTION II – To be completed by HR O

Decision: ☐ Approved ☐ Denied HRO Representative Date: / /