REQUEST FOR DUAL EMPLOYMENT

SECTION I

Employee's Name: _____ ID#: _____

PRIMARY EMPLOYMENT Department Information	
Dept Name:	
Job Title:	

SECONDARY EMPLOYMENT Department Information	
Dept Name:	

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Secondary employment work schedule including hours of work:

State the (m)1. 11-52/dsa6.3 (e)-Dual Employment (k)-Source of funds: 3 (m)1. 11-52/dsa6.3 (e)-Dual Employment (k)-Source of funds: 79u-6.3 (e): 11

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 employment 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 HRO

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