

REQUEST FOR DUAL EMPLOYMENT

Employee's
Name:

Employee's
ID#:

SECTION I

Employee's
Name:

ID#: _____

Secondary employment work schedule including hours of work: _____

State the principal reason for dual employment and include Title Code: _____

_____ 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.

(Print) Employee Name X
Signature Date

(Print) Primary Supervisor X
Signature Date

(Print) Secondary Supervisor X
Signature Date

SECTION II – To be completed by HR

Decision: Approved Denied HRO Representative Date: / /