**Employee Disclosure of Outside Employment**

Secondary employment is defined as follows: Any activity an individual engages in, that provides said individual with financial compensation or gain. Employment requires the use of an individual’s time, skills, abilities and talents to perform work related functions. (For example: consulting or instructional positions, property manager, writing/editing a book, etc., is considered outside employment). Personal investments and income derived from rental properties do not constitute employment.

**Instructions: Complete this form and route to your supervisor and your vice president for signatures. This signed form must be returned to Human Resource Services for inclusion in your personnel file.**

**Employee Name:** Click here to enter text. **Employee S#:** Click here to enter text.

**Employee Category:** Choose an item. **Department:** Click here to enter text.

**Supervisor Name:** Click here to enter text.

**Name of Outside Employer/Business**: Click here to enter text.

**What are the hours you intend to work?** (List days of week and times): Click here to enter text.

**Total number of hours per week you intend to work**: Click here to enter text.

**Describe the type of work you will perform for the employer**: Click here to enter text.

**Employee Signature: Date** Click or tap to enter a date.

**Supervisor Signature: Date** Click or tap to enter a date.

**Vice President/President Signature Date** Click or tap to enter a date.

Please note: No employee is allowed to engage in any outside employment or other activity that is directly incompatible with the duties and responsibilities of the employee’s State position, including any business transaction, private business relationship, or ownership. State employee are prohibited from accepting outside compensation for performance of State duties. This includes acceptance of any fee, compensation, gift, reward, gratuity, expenses, or other thing of monetary value that could result in preferential treatment, impediment of governmental efficiency or economy, loss of complete independence and impartiality, decision making outside official channels, disclosure or use of confidential information acquired through State employment. Incompatibility includes reasonable inference that the above has occurred, may occur, or has any other adverse effect on the public’s confidence in the integrity of State government.

Thank you for completing this document. Your disclosure form will be reviewed and retained in your personnel file. Please update/amend this form as needed. Your appointing authority will review this disclosure form prior to approving any outside employment. The appointing authority shall base approval on whether the outside employment interferes with the performance of your State job or is inconsistent with the interests of the State, including raising criticism or appearance of a conflict.