

Authorization for Additional Employment with Other System Member

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| **Name: *(First, Middle, Last)*** | | **UIN:** |
| **Title:** | **Department:** | |

I request permission to accept additional employment with another A&M System member. This employment will not interfere with my assigned duties, and I will act as a representative of that member, not the Texas A&M Forest Service.

1. Name of System member and department for additional employment:



1. Brief description of work to be performed:



3. Schedule for when the additional employment will be performed:



1. Hours worked during normal workday/workweek will be made up by:

N/A

Taking Annual Leave

Flex Work Schedule (must complete and attach a Flex Work Schedule Request)

5. Period of request:  through 

*Date Date (no later than August 31st of fiscal year)*

Employee Certifications

* There will be no conflict of interest between the additional employment and my responsibilities as an employee of Texas A&M Forest Service.
* The additional employment will be conducted at no expense to Texas A&M Forest Service.
* I have read Administrative Procedure 10.28 Additional Employment with Other System Members and agree to conduct the additional employment in accordance with these procedures, including the requirement to not engage in it prior to receiving the requisite approvals.

Signatures/Approvals

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| --- | --- | --- |
|  | Signature | Date |
| Employee |  |  |
| Department Head |  |  |
| Associate Director |  |  |
| Director |  |  |