

Virginia State University Outside Employment Form

For the Period of January

through December

Name:

In accordance with VSU Human Resource Policy 7060, I request approval to engage in outside employment as follows:

Name of Outside Employer:				
Address of Outside Employer:				
Job Responsibilities of Outside Em	ployment:			
Supervisor (if applicable):				
Hours of Work:				
Dates of Employment:	From:		To:	
		_	_	

Period of activity is not to exceed one calendar year.

Current Position Held at VSU:	
Department:	
Campus Box Number:	
Current Work Load / Schedule (hours/credit hours per week)	
Office Hours:	

EMPLOYEE: I certify that the above information is accurate. Additionally, I certify that the above request will not in any way interfere with my full-time duties and responsibilities and/or related assignments at Virginia State University. I have reviewed the University's Policy on Outside Employment Activities and will comply with the provisions contained therein. I understand that any deviation from the above request must be re-evaluated by the appropriate University officials.

Employee's Signature & Date:

SUPERVISOR: I have reviewed the above request and certify that the proposed outside employment is in accordance with University policy.

Supervisor's Signature & Date:

Approvals

🗆 Yes	Dean/Director's
🗆 No	Signature & Date:
□ Yes	Vice President's
🗆 No	Signature & Date:
🗆 Yes	HR Director/Associate Director's
🗆 No	Signature & Date:

The Office of Human Resources will send a copy of the completed form to the employee and the employee's supervisor after the Director or Associate Director for HR's signs it.