



NOTIFICATION OF SECONDARY EMPLOYMENT

Directions: In compliance with State Board Policy 615.01 and the ASU local policy, Conflict of Interest: Secondary Employment, an employee is required to complete the "Notification of Secondary Employment" form and submit the form to his/her immediate supervisor for review and approval prior to entering into an agreement of secondary employment. It is the responsibility of the employee to notify the University by submitting a revised "Notification of Secondary Employment" form if the status of previously approved secondary employment changes. If no change occurs with the previously approved secondary employment, the employee is required to re-submit the "Notification of Secondary Employment" form for review and approval by the supervisory chain of command on an annual basis.

Employee: _____ Employee Number: _____

Name of Secondary Employer: _____

Secondary Employment Title: _____ Effective Date: _____

Description of Secondary Employment Duties/Responsibilities: _____

Employee Statement of Compliance: This secondary employment (a) does not interfere with the performance of other responsibilities as a System employee; (b) is limited in time; (c) is compatible with the interests of Athens State University; and (d) does not require use of institutional resources or facilities. This secondary employment will not (a) disrupt or interfere with the normal operations of the University; (b) directly compete with the University; (c) impose additional financial operations burden upon the University; (d) violate the Alabama Code of Ethics for public employees as set forth in the Code of Alabama; or (e) be of a nature such that the outside employment would tend to decrease the effective performance of my University employment duties.

Employee Signature _____ Date _____

Review and approval of the submitted "Notification of Secondary Employment" form by the supervisory chair of command indicates that this potential secondary employment does not constitute a conflict of interest as defined by State Board Policy 615.01.

Reviewed & Approved By: Immediate Supervisor _____ Date _____

Reviewed & Approved By: Dean/Vice President _____ Date _____

Reviewed By: Human Resources Specialist _____ Date _____

Approved By: President _____ Date _____

If the "Notification of Secondary Employment" form is not approved, explain the reason(s) for the disapproval: _____

cc: Employee
Human Resources
Immediate Supervisor