4.205:01 Outside Employment Disclosure and Approval Form

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Employees should use this form to disclose and obtain approval for all Non-Antioch University employment. This form must be submitted prior to any outside employment. This form must be completed annually and returned with your contract to your campus Human Resources Office.

Employees should first read Policy 4.205 Outside Employment or Policy 5.327 Faculty Outside Employment, as well as Policy 2.105 Conflicts of Interests, before submitting this form.

EMPLOYEE NAME:

TITLE:

DEPARTMENT:

UNIT / CAMPUS:

1. Outside Employment Requested

Name of Outside Employer:

Address of Employer:

Please describe your proposed job responsibilities with outside employer:

On what dates would the employment begin and end?

Days worked per week:   Hours worked per day:

Describe the amount of time you would work for this outside employer if the above does not apply:

2. Certification

I hereby certify that the outside work in which I propose to be engaged during the current fiscal year (July 1 through June 30):
Would not interfere with my professional contractual obligations to Antioch University. I understand that it is the right of my Unit Head / Supervisor to determine if there is undue interference.

Would not involve work which would create a conflict of interest with my duties and responsibilities at Antioch University.

Would not involve use of other Antioch University personnel or resources as outlined in Policy 4.205, Outside Employment.

______________________________       __________________________
Signature of Employee                Date

I understand that should I fail to report and fully disclose the scope of outside employment, I may be subject to discipline including possible termination from employment.

You may want to keep a copy of this completed form for your records.

Approved by Supervisor: ___________________________       DATE: ___________________________
Supervisor Name / Title

Approved by Human Resources: ___________________________       DATE: ___________________________
Name / Title