

Request for Outside Employment

Instructions: One form is required for each outside employment. Notice is required before accepting outside employment to avoid conflict of interest or duties.

Section I – Employee Name: _____

Section II – Outside Employment Information. Complete all boxes in each column where “NA” isn’t listed.

	Delaware County Employment	Outside Employment
Name of Employer:	Delaware County	
Address of Employer:	NA	
Phone # of Employer:	NA	()
Department Name:		
Job Title:		
Duties and Responsibilities:		
Begin/End Date:	NA	
Hours per week:		
Receiving Compensation	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section III –Employee Statement.

I hereby certify that the outside employment reported above does not constitute a conflict with my Delaware County duties and responsibilities. Consistent with Ohio law, I understand and agree that Delaware County may deem this as a conflict of interest at which time I will be notified and may be required to end the employment. I am in receipt and understand the Ohio Ethics Policy. Should I have questions I will contact Delaware County Human Resources.

Employee Signature: _____ Date: _____

Routing: Employee must complete form and submit to their Department Director, who will complete Section IV and submit to the Director of Human Resources. Employee will be notified of result.

Section IV –Approvals.

In my judgment, the outside employment or activity described above is not in conflict with the employee’s current duties and responsibilities.

Department Director: _____ Date: _____ Approved Not Approved

Director of Human Resources: _____ Date: _____ Approved Not Approved

