

## OUTSIDE EMPLOYMENT APPROVAL FORM

Name: \_\_\_\_\_ School: \_\_\_\_\_

Semester: \_\_\_\_\_ Employer: \_\_\_\_\_

Outside Employer    Self-Employed    Length of Employment: \_\_\_\_\_

# of Hours Per Week: \_\_\_\_\_

### Semester Schedule Combined with Outside Employment \*

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8:00						
9:00						
10:00						
11:00						
12:00						
1:00						
2:00						
3:00						
4:00						
5:00+						

*\*Note\* Include teaching, office hours, committee assignments, etc.*

Description of and Rationale for Outside Employment:

\_\_\_\_\_

\_\_\_\_\_  
Faculty Signature

Associate Dean Approval:

Comments:

\_\_\_\_\_

Dean Approval:

Comments:

\_\_\_\_\_

Vice President's Approval:

Comments:

\_\_\_\_\_

President's Approval:

Comments:

\_\_\_\_\_