

**REQUEST FOR APPROVAL  
TO ENGAGE IN OUTSIDE EMPLOYMENT/CONSULTING**

Name \_\_\_\_\_

Department/Division \_\_\_\_\_

Nature \_\_\_\_\_

(If further space is needed, use the back of this form.)

Planned Use and Reimbursement of College Resources

Total Hours Anticipated \_\_\_\_\_

Expected Start Date \_\_\_\_\_

Expected Completion Date \_\_\_\_\_

Semesters of Activity: Fall \_\_\_\_\_

Spring \_\_\_\_\_

Summer \_\_\_\_\_

Hours Per Day \_\_\_\_\_

Hours Per Week \_\_\_\_\_

Times of Day \_\_\_\_\_

Primarily Weekends: Yes \_\_\_\_\_ No \_\_\_\_\_

I assert that my outside employment/consulting, described above, will not interfere with the performance of my duties at Georgia Southwestern State University. I understand that this information will remain confidential and will not be available, except to University administrators, without my consent.

\_\_\_\_\_  
Faculty Member

\_\_\_\_\_  
Date

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

\_\_\_\_\_  
Department/Division Chair

\_\_\_\_\_  
Date

Any member of the faculty, staff, or administration who believes there has been an infringement of his/her rights related to outside employment/consulting shall have the right of appeal (Section III, Article Z, Georgia Southwestern University Faculty Handbook).