

EMPLOYEE REQUEST FOR OUTSIDE EMPLOYMENT



TO: _____
(Your supervisor)

FROM: _____
(Your name)

DATE: _____

As defined in Section 210 of the City's Personnel Policy, I am requesting approval of employment outside my position with the City of Lewiston.

| | |
|---------------------|-----------------------------------------------------------------------|
| Business name: | Business address: |
| Position Title: | Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> |
| Weekly Hours: | Schedule: |
| Start Date: | End Date: |
| Nature of Position: | |

My secondary job will not affect the responsibilities of my position with the City, reduce my efficiency, or adversely affect the City's image. I understand that I will not be eligible for paid sick leave when my absence is the result of an injury sustained at my secondary job.

The following needs to be considered and addressed if necessary:

- If your City job requires standby or on-call work, you need to address how the second job will affect the City's position requirements.

- Will the secondary job require your attention during your City job hours (ie, telephone calls, cell phone, faxes, emails, copy machine, etc.) and how do you propose to handle those interruptions/distractions?

Employee Signature

Date

Recommend for approval:

Approved

Disapproved

Department Head

Date

City Mayor

Date

Signed copies to employee, supervisor, and dept. director. Original to HR employee file.