Request for Private Employment/Activity

Instructions: One form is required for each outside employment/activity. Approval is required before accepting an outside employment activity. Approvals expire at the end of the outside employment/activity.

Section I - Name:_____ **EID#:**_____

Section II - Purpose. *Check the appropriate box.*

□1. For approval to hire the above named person who is employed by, or involved with the activities of, a private entity.

□2. For approval for the above named Lamar Port Arthur employee to participate in employment/activity with a private entity.

Section III - Private Employer Information. *Complete all boxes.*

	Outside Private Employment/Activity
Name of Employer/Activity:	
Address of Employer/Activity:	
Phone# of Employer/Activity:	
Department Name:	
Job Title:	
Duties/Responsibilities:	
Begin/End Date:	
% of Appointment/Hours per week:	
Receiving Compensation?	□ Yes □No

Section IV - Employee/Prospective Employee Statement. *I hereby certify that the private employment/activity reported above does not constitute a conflict with my Lamar State College - Port Arthur duties and responsibilities. I understand and agree that Lamar State College - Port Arthur may lawfully require me to end the employment/activity if it is determined to be in conflict with my Lamar State College - Port Arthur duties and responsibilities.*

Employee/Prospective Employee Signature: _____ Date:_____

Section V - Department Head Review. *Select one of the following statements:*

□ *In my judgement the private employment/activity described above is not in conflict with the employee's Lamar State College - Port Arthur duties and responsibilities.* ***The request is approved.***

□ *In my judgement the private employment/activity described above may be in conflict with the employee's Lamar State College - Port Arthur duties and responsibilities.* ***I am forwarding the request for further administrative review.***

Department Head Signature: _____ Date:_____

Section VI - Administrative Review and Decision.

Dean/Division VP Signature: _____ Date:_____□ Approved □ Not Approved

Routing: Original to Human Resources for placement in the employees personnel file.