



APPROVAL OF OUTSIDE EMPLOYMENT

Year: _____

Full-time and pro-rata faculty members desiring to engage in outside employment or practice of profession should complete this form and forward it through channels to the President for approval. Please submit to your supervisor no later than **June 30 of the applicable year** for approval.

NAME _____ DATE _____

DEPARTMENT _____ COLLEGE _____

Permission is requested to accept employment (practice of profession, consulting or business) outside Marywood University. I understand that this application must receive all required University approvals prior to my engaging in outside employment. I certify that:

- Such business activities are of such character as not to damage the prestige or image of Marywood University;
- The business activities will not involve unauthorized use of University property;
- Such business activities will not interfere with my regular duties and responsibilities as a member of a department/unit within the University; and,
- The activities of this business or professional organization and my responsibilities in their employ will not compete in any manner with similar activities over which I would have direct supervision, inspection, or purchasing authority within the university or agency, such being a conflict of interest.

TEACHING LOAD AT MARYWOOD UNIVERSITY: Fall _____ Spring _____

NAME AND ADDRESS OF OUTSIDE EMPLOYER:

NATURE OF OUTSIDE EMPLOYMENT (please describe in detail):

Amount of Time Devoted Weekly to Outside Employment:

Period of Request: (From – To)

Requests will not be approved for a period longer than one fiscal year and all authorizations will terminate **June 30 of that fiscal year**.

Department Head/Director

Date

Dean

Date

Provost

Date

President

Date

NOTE: Please submit to appropriate Administrator.