



NOTIFICATION OF SECONDARY EMPLOYMENT

Directions: In compliance with State Board Policy 615.01 and the BSCC local policies: Conflict of Interest and Ethics (D/1.3) and Outside Employment (D/1.23), an employee is required to complete the "Notification of Secondary Employment" form and submit the form for review and approval to the President via his/her immediate supervisor and appropriate President's Cabinet Member **prior** to entering into an agreement of secondary (outside) employment. It is the responsibility of the employee to notify the College by submitting a revised "Notification of Secondary Employment" form if the status of a previously approved secondary employment changes. If no change occurs with the previously approved secondary employment, the employee is required to re-submit the "Notification of Secondary Employment" form for review and approval on an annual basis.

Employee: _____ Employee ID Number: _____

Name of Secondary Employer: _____

Secondary Employment Title: _____ Effective Date: _____

Description of Secondary Employment Duties/Responsibilities: _____

Employee Statement of Compliance: This secondary employment (a) does not interfere with the performance of other responsibilities as a System employee; (b) is limited in time; (c) is compatible with the interests of Bevill State Community College; and (d) does not require use of institutional resources or facilities. This secondary employment will not (a) disrupt or interfere with the normal operations of the College; (b) directly compete with the College; (c) impose additional financial operations burden upon the College; (d) violate the Alabama Code of Ethics for public employees as set forth in the Code of Alabama; or (e) be of a nature such that the outside employment would tend to decrease the effective performance of my College employment duties.

Employee Signature Date

Review and approval of the submitted "Notification of Secondary Employment" form by the supervisory chain of command indicates that this potential secondary employment does not constitute a conflict of interest as defined by State Board Policy 615.01.

Reviewed & Approved by: Immediate Supervisor Date

Reviewed & Approved by: Appropriate President's Cabinet Member Date

Approved by President Date

If the "Notification of Secondary Employment" form is not approved, state the reason(s) for the disapproval:

File: = Office of Personnel
C = President
Supervisor
Employee