

Administrative and Professional Faculty

Extra Employment Statement

Instructions

1. This form is to be completed by all full-time Administrative/Professional (A/P) faculty
 - A. for any employment or assignment **through the University** which results in additional compensation, other than their primary position ("Other Radford University Employment"). The form must be completed and submitted to their supervisors for approval in advance of the starting date of the Other Radford University Employment.
 - B. wishing to engage in **Outside Employment**. The form must be completed and submitted in advance for approval by their supervisors and other appropriate university officials. Individuals engaging in outside employment without securing prior approval may be subject to disciplinary action up to and including dismissal.
 - i. This also applies to A/P faculty on part-time appointments during those months they are under contract by the University.

2. The decision to approve outside employment will be based upon a number of factors including judgment of whether the proposed employment will adversely affect the individual's performance at Radford University, will have negative public relations value, or will constitute a conflict of interest under State or local laws.

3. For Other Radford University Employment and/or Outside Employment, if approved, the original will be returned to the employee and a copy will be sent to the Department of Human Resources and maintained in the employee's personnel file.

4. The obligation of full-time A/P faculty is to fulfill the duties of their primary positions with the University. Other Radford University Employment and/or Outside Employment should in no way interfere with this responsibility. If an employee misses time during regular working hours, the employee must use leave or make up the time (hour for hour) during the same work week. The employee's immediate supervisor must verify that time missed has been made up or documented on the employee's time sheet.

Part I. A/P Faculty employee information

AP Faculty Name: _____

Campus Address: Department of _____

P.O. Box: _____

Phone: _____

I plan to engage in extra employment during the 20____ - ____ contract year.

Signature Date

Please complete the following information:

a. Name and address of employer (or indicate if self-employed).
b. Amount of time to be spent in extra employment (hours per week or month).
c. Expected duration of extra employment. (Maximum of one year; longer periods must be reconsidered annually.)
d. Detailed description of the duties and responsibilities of the extra employment.
e. Explanation of how the extra employment will complement your duties and/or professional development.
f. Explanation of how the extra employment will be carried out without adversely affecting your responsibilities at Radford University
g. Extent to which Radford University equipment, supplies, services, personnel resources, or facilities will be used in the extra employment.

Part II. Approvals

Supervisor (Required for Other Radford University Employment and Outside Employment)	
Recommend:	_____ approval _____ disapproval
Comments (if any):	
_____	_____
(Signature)	(Date)

The following signatures are also required for Outside Employment, as specified by the employee's Division Head.

Department Chair	
Recommend:	_____ approval _____ disapproval
Comments (if any):	
_____	_____
(Signature)	(Date)

Dean/Director

Recommend: _____ approval _____ disapproval

Comments (if any):

(Signature)

(Date)

Employee's Division Head (President/Vice President/Provost)

Recommend: _____ approval _____ disapproval

Comments (if any):

(Signature)

(Date)