

External Employment Application and Approval Form

With few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.

Employee name: _____
First Middle Last

Title: _____

Department: _____

I request permission to accept external employment. The proposed employment will not interfere with my assigned duties. In such external employment, I will act as an individual and not as a representative of The Texas A&M University System, and, if I am a faculty member, such external employment is not directly related to my professional discipline.

1. Name and address of employing firm, agency or individual: _____

2. Nature of work (include where the work will be performed): _____

3. Release time requested? _____ Yes _____ No. If yes, the following is my basis for requesting release time (provide remuneration, value to System, professional enhancement):

4. Select the amount of expected compensation or value received for external employment.

___\$0 ___\$>0-\$5,000 ___\$>5,000-\$10,000 ___\$>10,000-\$25,000 ___\$>25,000-\$50,000 ___\$>50,000

Note: External Employment requests will not be granted for a period longer than one year. All authorizations, regardless of length, will terminate on August 31 of the current fiscal year. All employees/faculty members must reapply for authorization each fiscal year, defined as September 1 – August 31.

5. Period of request: _____ through _____
Date Date (No later than August 31 of current fiscal year)

Total release time requested for period (if none requested, state N/A): _____

Total release time (including previous approvals): _____

6. Equity ownership involved? _____ If so, the amount and type of equity interest owned:

I understand that external employment may not be undertaken on that portion of time covered by federal grants or contracts. I further understand that this request applies only to that portion of my time for which I am employed by The Texas A&M University System. I agree to furnish reports and additional details of employment as required.

I certify that there will be no conflict of interest between this external employment and my responsibilities as an employee of The Texas A&M University System. I also certify that this external employment will be conducted at no expense to The Texas A&M University System.

I fully agree and understand that official release time is contingent upon this activity being of value to The Texas A&M University System and an enhancement to my relationship thereto, and so long as I receive no remuneration for the work performed. Otherwise, I will take vacation or accumulated compensatory time for such absences, as applicable.

I certify that I have read System Policies 07.01, *Ethics*, and 31.05, *External Employment and Expert Witness*, and System Regulation 31.05.02, *External Employment*, and agree to conduct my external employment in accordance with the provisions contained therein, including the requirement that I will not engage in external employment prior to receiving the requisite approvals.

If I am a faculty member, I certify that all external employment requested will not be directly related to my professional discipline.

Employee signature

Universal Identification Number

Date

Approval recommended: Release time recommended? Yes _____ No _____

Department Head

Date

Approved: Release time approved? Yes _____ No _____

Date

Date

President/Chief Executive Officer or designee

Date