

***BARGAINING UNIT SUPPLEMENTAL EMPLOYMENT OUTSIDE THE COLLEGE
APPROVAL FORM**

Name:
Home Department:
Description of work to be performed:
Departmental VP Signature:

I certify that the above supplemental work is being performed outside of my regularly scheduled work hours.	
_____	_____
Employee Signature	Date
Upon completion, please return this form to Human Resources.	

*Paid work done outside the full-time college job for which you are employed.