



Permission for Outside Activity

Adopted by President’s Cabinet 7/22/16
Revisions Adopted by President’s Cabinet 6/26/18

EMPLOYEE NAME: _____

ADDRESS: _____

PROPOSED ACTIVITY: _____

ADDRESS OF PROPOSED ACTIVITY: _____

DESCRIPTION OF PROPOSED ACTIVITY:

WORK SCHEDULE FOR PROPOSED ACTIVITY: _____

EGSC RESOURCES REQUESTED FOR PROPOSED ACTIVITY: _____

PLAN FOR REIMBURSING EGSC FOR RESOURCES USE: _____

CERTIFICATION STATEMENT

I, _____, do hereby certify that the above proposed external activity will not interfere with the regular and punctual discharge of my official duties at East Georgia State College. I understand that East Georgia State College is my primary employer. In addition, I have discussed all potential conflicts of interest with my first line supervisor and presented a plan for management of any conflicts to my supervisor, reviewed the College’s Conflicts of Interest and Conflicts of Commitment Policy concerning outside activities and agree to comply the policy. I understand that I have a continuing duty to report and fully disclose any conflict or potential conflict that may arise during the course of this outside activity. I understand that, if approved, this request for outside activity will be effective for a period of one (1) year from the date of approval. Continuance of the outside activity beyond this period while employed at EGSC will require submission of a new outside activity request.

EMPLOYEE SIGNATURE

DATE

SUPERVISOR/ DEAN

DATE

PRESIDENT

DATE

Copy to: Employee
Supervisor/Dean
Director of Human Resources