

APPLICATION AND APPROVAL FOR OFF-DUTY EMPLOYMENT

SECTION I APPLICANT DATA AND CERTIFICATION (Completed by Applicant)

LAST NAME, FIRST NAME, MIDDLE INITIAL RANK/GRADE DUTY TITLE

NAME & ADDRESS OF EMPLOYER/COMPANY NAME OF IMMEDIATE SUPERVISOR

POSITION IN OUTSIDE EMPLOYMENT WORK DAYS/HOURS FOR OUTSIDE EMPLOYMENT

SPECIFIC DUTIES AND RESPONSIBILITIES: _____

I have read and understand the OUTSIDE EMPLOYMENT POLICY FOR THE TENNESSEE NATIONAL GUARD. I also understand that my off-duty employment will not interfere with my full-time duties and that my full-time position has precedence (i.e. – if required to stay late, work extra, etc.).

DATE SIGNED SIGNATURE OF APPLICANT

SECTION II SUPERVISOR'S RECOMMENDATION

RECOMMEND APPROVAL. I HAVE PERSONALLY INTERVIEWED THE APPLICANT AND I HAVE NO OBJECTION TO THE REQUESTED OFF-DUTY EMPLOYMENT.

RECOMMEND DISAPPROVAL (EXPLAIN).

DATE SIGNED NAME/GRADE OF SUPERVISOR SIGNATURE

SECTION III POSITION MANAGEMENT OFFICER (PMO)

APPROVAL REMARKS:

DISAPPROVAL

DATE SIGNED NAME/GRADE OF PMO SIGNATURE

SECTION IV APPROVING AUTHORITY ACTION (Completed by DCSHRO)

APPROVED REMARKS:

DISAPPROVED

DATE SIGNED NAME, GRADE AND TITLE SIGNATURE