



Permission for Proposed Outside Employment FOR FULL-TIME EMPLOYEES

Note: if you have previously submitted information regarding outside university compensation for the 2019 fiscal year, you do not need to submit

this form. **Employee name:**

Email address:

Employee ID:

Title:

Unit:

Immediate supervisor:

External (non-OU) outside university compensation (complete this section for all external compensation):

Description	Dates of Assignment	Total Days Away from OU	Class Hours Away	If teaching, how are class responsibilities handled in your absence?

The employee is responsible for printing and submitting this form to their supervisor for approval and routing to the Dean's and Provost's office.

By signing below, if applicable, leave will be taken for the time missed from work or the work will be performed outside normal working hours.

Signatures:

Employee Date

Employee's immediate supervisor approval Date

Employee's Chair/Director/Supervisor approval Date

College Dean/Supervisor approval Date

Vice President approval Date