



OUTSIDE EMPLOYMENT/BUSINESS ACTIVITY FORM
Supplement to TSU Policy 6-26

EVERY FACULTY MEMBER, PROFESSIONAL STAFF AND ADMINISTRATOR IS REQUIRED TO COMPLETE AND SUBMIT THIS FORM EACH SEMESTER AND ANY OTHER TIME PRIOR TO ENGAGING IN OUTSIDE EMPLOYMENT, BUSINESS SERVICES OR OTHER ACTIVITY WHICH MAY CONFLICT WITH TENNESSEE STATE UNIVERSITY ASSIGNMENTS.

Please check the appropriate item:

Fall Semester 20__ Spring Semester 20__ Summer Semester 20__

I do not have or anticipate outside employment during the academic year.

I have ongoing outside employment/ business activity previously approved by university.

Brief Description of previously approved ongoing Outside Employment/ Business Activities

Three horizontal lines for text entry.

Time Commitment per week Hours Days Times

A request is being made for outside employment / business activity. (I understand that I am not authorized to engage in this activity without prior approval of the president or his designee.)

Brief Description of Proposed Outside Employment/ Business Activities

Three horizontal lines for text entry.

Time Commitment per week Hours Days Times

Projected date that outside employment/ business activity will begin.

This activity is in the area of : Teaching Research Public Service Consulting Professional Services Other

Signature Date

Name(printed) E-mail address

Department Head Date Recommended yes or no

Dean/ Director Date Recommended yes or no

VPAA Date Approved or not approved

Form must be signed by faculty member; Department heads and deans must either recommend or not recommend the outside employment request.