

CURRITUCK COUNTY **EMPLOYEE REQUEST FOR OUTSIDE EMPLOYMENT**

Date:
Employee Name:
Employee Title:
Please complete the following information about the requested Outside Employment:
Company or Agency
Title and Nature of Position
Requested Start Date
Duration of Outside Employment, if known
Hours of Position
By my signature below I understand that my employment with Currituck County is my primary employment and must take priority over all other employment interests. I agree to contact my supervisor and Human Resources if my outside employment terminates or if the nature of this outside employment may change in terms of hours, duties of position.
Employee Signature
Immediate Supervisor Signature
Department Head Signature
Human Resources Director's Signature
County Manager's Signature