



Request for Secondary Job Approval (Exempt Employee)

Employee# _____ Current Full-time Position _____

Name _____
Last First Middle

In addition to my current full-time exempt position, I am asking approval to work a secondary job at FSCJ. I understand that any activity associated with or in support of the secondary job is prohibited during my full-time position work hours.

**If you plan to modify your regular work schedule to accommodate the secondary job assignment, the approval of your Vice President is required. Secondary job assignments may not occur during the full time position work schedule, regular or modified.*

Regular Work Schedule: _____

*Modified Work Schedule (if needed): _____

Secondary Job: ___ Adjunct** ___ Test Examiner ___ Program Facilitator ___ Test Proctor
___ Other _____

Campus / Center _____ Begin Date _____ End Date _____

Secondary Job Schedule (Except Adjunct*): Schedule _____

**Adjunct assignments, please provide:

Class Reference # _____ Class Prefix and Number _____

Credit Hours (**Max. 4 per semester**) _____ Class Meeting Day / Time _____

Signature of Employee _____ Date _____

Approval of Immediate Supervisor _____ Date _____

Printed Name of Immediate Supervisor _____

*Approval of Vice President _____ Date _____

Printed Name of Vice President _____ Date _____

Approval of Secondary Job Supervisor _____ Date _____

Printed Name of Secondary Job Supervisor _____

Before the start date of the assignment, the completed form must be forwarded to Human Resources