

EMPLOYMENT REQUIREMENTS
NONSCHOOL EMPLOYMENT

DBF (R) EXHIBIT

OUTSIDE EMPLOYMENT

DATE: _____

NAME OF EMPLOYEE: _____

CURRENT POSITION: _____

CAMPUS/DEPARTMENT: _____

DESCRIPTION OF OUTSIDE EMPLOYMENT: _____

IMPACT ON DISTRICT EMPLOYMENT (IF ANY): _____

Signature

Date

Principal/Immediate Supervisor Approval

Date

Superintendent's Approval

Date