



# Request for Approval of Supplemental Employment

Supplemental Standards of Ethical Conduct for Employees of the United States Postal Service  
5 C.F.R. § 7001

Part I – Employee Information	
1. EMPLOYEE NAME (Last, First, MI)	
2. VP ORGANIZATION	3. CONTACT INFORMATION Phone: (Desk) (Cell) email:
4. TITLE OF POSITION	5. DUTY STATION (Address)
6. FINANCIAL DISCLOSURE FILING STATUS <input type="checkbox"/> Public (OGE 278) <input type="checkbox"/> Confidential (OGE 450) <input type="checkbox"/> None	
7. NAME OF SUPERVISOR	8. SUPERVISOR CONTACT INFORMATION Phone: (Desk) (Cell) email:
Part II – Outside Employer Information	
1. NAME OF EMPLOYER	
2. ADDRESS	3. TYPE OF BUSINESS
4. CONTACT PERSON Name:	Phone:  email:
5. LOCATION OF WORK (Address)	6. TITLE OF POSITION
Part III – Position Description	
Outside Position	
1. Will work for this outside employer occur entirely outside of your normal tour of duty? <input type="checkbox"/> Yes <input type="checkbox"/> No	
1a. If you answered “no” to question 1, estimate the number of hours or days that you will be absent from work and indicate the type of leave to be requested:	
2. Describe the duties and responsibilities of this outside position:	
3. Does this outside employer do business with the Postal Service (other than as a regular postal customer)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

3a. If you answered "yes" to question 3, explain the relationship between this outside employer and the Postal Service:

4. Will you have any dealings with the Postal Service in this outside position?  
 Yes  
 No

4a. If you answered "yes" to question 4, explain what duties you will have with respect to the Postal Service:

**Postal Position**

5. Do you currently have any dealings with this outside employer in your postal capacity?  
 Yes  
 No

5a. If you answered "yes" to question 5, explain what postal duties you have involving this outside employer:

6. Have you ever had worked on a postal assignment or interfaced with this outside employer in your postal capacity?  
 Yes  
 No

6a. If you answered "yes" to question 6, explain the past postal assignment or interaction with this outside employer:

7. In performing your official postal duties, could your actions affect the financial interests of this outside employer?  
 Yes  
 No

7a. If you answered "yes" to question 7, explain what affect your official duties may have on this outside employer:

**Employee Signature**

	Date:
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**Part IV – Supervisor Review/Recommendation**

1. Describe the extent to which the employee's official duties are related to the proposed outside employment. If not related, please explain:

2. Describe any potential conflicts between the employee's official duties and the proposed outside employment:

3. After reviewing the information contained herein, and obtaining additional information where appropriate, do you approve this employee's request for supplemental employment with this outside employer?

- Approved
- Disapproved

**Supervisor Signature**

Date: