



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:

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: