



OUTSIDE EMPLOYMENT Notification Form

(If approved, the approval could be subject to annual review.)

Date:

Employee Name:

Date of Hire with City:

Department/Division:

Job Title:

I hereby notify the City of Billings of the outside employment described below, understanding that such work will neither conflict with my employment with the City of Billings, nor cause any conflict of interest, either actual or potential in relation to my employment with the City of Billings. I understand that I am not representing the City of Billings in any way, that I am a private citizen. I agree to hold the City of Billings harmless for any act or omission arising from my outside employment, and that I will not use any City of Billings resources in my secondary employment including: city time, official reports, computers, vehicles, or any other equipment or resources available to me in the course of my employment with the City of Billings. **Violation of this is a criminal offense - Refer to Billings Montana City Code, Article 2-700 Code of Ethics, Section 2-703 Fair and Equal Treatment., (b) No official shall use public time, facilities, equipment, supplies, personnel, or funds for the official's private business purposes.**

OUTSIDE EMPLOYMENT INFORMATION

Company Name:

Supervisor's Name:

Dates of Outside Employment Beginning:

Ending:

Nature of Outside Employment:

How many hours in the average month will you be involved in outside employment and when is the work typically done, e.g., weekends, evenings, etc.?

Employee Signature:

Division Supervisor Printed Name:

Division Supervisor Signature:

No Conflict Evident/Approved

Possible Conflict (referred to Department Supervisor for review)

Department Supervisor Printed Name:

Department Supervisor Signature:

No Conflict Evident/Approved
