

**Northwest Educational Service District 189
Request for Approval of Outside Employment**

Employee: _____

Name of outside employer: _____

Worksite: _____ Phone: _____

Contact person: _____ Phone: _____

Work to be performed: _____

Hours and days of employment: _____

Additional comments: _____

Employee signature

Date

Supervisor comments: _____

Immediate Supervisor

Date

Superintendents comments: _____

Approved Disapproved

Superintendent

Date