Department of Shared Administrative Services
Office of Personnel Management

Concurrent Employment Request

Employee's Name		Personnel Number		Primary Business Area	
	PRIMARY EMPLOYER INFORMATION			**SECONDARY EMPLOYER INFORMATION**	
Employer					
Address					
Phone Number					
Contact Person					
E-mail Address					
Job Title					
Position Number					
Pay Grade					
FLSA Status	☐ Exempt ☐ Non-Exempt			☐ Exempt ☐ Non-Exempt	
Salary				Proposed Salary	
Line Item Max					
Employment Dates					
Work Days					
Work Times					

DUTIES PERFORMED AND EXPLANATION/JUSTIFICATION

The submission of this request to the Transformation and Shared Services Secretary certifies that:

(1) The additional duties performed for the secondary employer by the employee named herein will not interfere with the proper and required performance of the employee's primary duties;

(2) All wages paid to the employee will be in compliance with applicable provisions of the Fair Labor Standards Act including, but not limited to, over time provisions. The employee will take accrued leave, or work make-up time, for any secondary hours worked that are in conflict with primary hours of work; and,

(3) The combined salary payments from the secondary and primary employers will not exceed the larger maximum annual salary of the line-item position authorized for either agency/institution from which the employee is being paid (unless the employee is secondarily employed in a teaching position pursuant to Arkansas Code Annotated 19-4-1604(b) which allows employees to teach temporarily.

☐ Check here if ACA 19-4-1604(b) is applicable)

Signature of Primary Approving Authority

Signature of Secondary Approving Authority

DEPARTMENT OF TRANSFORMATION AND SHARED SERVICES

Based on the information provided, OPM recommends that this request be: ☐ **Approved** ☐ **Denied**

OPM Director

ACTION TAKEN:

☐ **Approved** ☐ **Denied**

SAS Secretary or designee

Date