Pursuant to Section 6.4.3 of the Twelfth Edition of the CSM Faculty Handbook, this form is to be completed and submitted to the employee's department head/division director or administrative supervisor to request authorization to engage in a non-professional, external commitment. Please see the Handbook for more information. If the space provided below is inadequate to accommodate your responses, please attach additional sheets.

Employee Name: _______________________ Dept./Div. __________________________

Name of entity involved in the external commitment:
_________________________________________________________________________

Specifically describe the nature of the external commitment to be undertaken:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Estimate of amount of time involved in performing the external commitment, including specific dates:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Is absence from scheduled classes involved? Yes _____ No _____ (Place an X in applicable space.)

If so, what arrangements have been made to provide class coverage?
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Describe how the external commitment will enhance or support your activities as a CSM employee:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Describe any actual or potential conflicts of interest between the external commitment and your CSM duties:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
Provide a statement addressing the issue of potential conflict of commitment:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Other non-professional, external commitments in which I am currently engaging that are similar in scope and magnitude to the commitment that is the subject of the present disclosure (if none, please so state):
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

The non-professional, external commitment I propose to undertake will be performed: (a) outside of my normal working hours _____, (b) on work time that I will make up _____, or (c) on work time for which I will declare annual leave ______. (Place an X in applicable space.)

________________________________________________________ ____________________
Employee Signature                          Date

________________________________________________________ ____________________
Department Head/Division Director/Administrative Director Signature                Date

________________________________________________________ ____________________
Associate Vice President for Academic & Faculty Affairs Signature                Date