

DUAL EMPLOYMENT PERMISSION FORM

WESTERN CAROLINA UNIVERSITY
CULLOWHEE, NORTH CAROLINA

Date: _____

Name: _____

Outside Agency: _____

Amount: _____

Reimbursement through the University? Yes _____ No _____

Period Covered: _____

Approved: _____
(Dean/Director)

Approved: _____
(Provost)

This form is in addition and prior to the OSCPXA 03 form which must be filed for dual employment

Revised 2/27/2006