

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