



# SOUTH CAROLINA DEPARTMENT OF PUBLIC SAFETY

## DUAL EMPLOYMENT REQUEST FORM

### REQUESTING (SECONDARY) AGENCY

AGENCY NAME: \_\_\_\_\_ SECTION/DEPT: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_ SSN: \_\_\_\_\_

DESCRIPTION OF SERVICES TO BE PERFORMED: \_\_\_\_\_

### DURATION OF SERVICES AND PROPOSED COMPENSATION

DATES (MONTH/DAY/YEAR): \_\_\_\_\_ TIMES: \_\_\_\_\_ TOTAL HOURS: \_\_\_\_\_

FROM: \_\_\_\_\_ FROM: \_\_\_\_\_ AM/PM HOURLY RATE: \_\_\_\_\_

TO: \_\_\_\_\_ TO: \_\_\_\_\_ AM/PM

TOTAL COMPENSATION: \_\_\_\_\_ TRAVEL AND SUBSISTENCE: \_\_\_\_\_

EMPLOYEE'S SIGNATURE

DATE

AUTHORIZED REQUESTING AGENCY SIGNATURE

DATE

### EMPLOYING (HOME) AGENCY

AGENCY NAME: \_\_\_\_\_ SECTION/DEPT: \_\_\_\_\_

EMPLOYEE CLASS CODE: \_\_\_\_\_ SLOT: \_\_\_\_\_ FLSA: \_\_\_\_\_ ANNUAL SALARY: \_\_\_\_\_

NORMAL WORK HOURS: FROM: \_\_\_\_\_ AM/PM TO: \_\_\_\_\_ AM/PM

IS THE REQUESTING AGENCY AUTHORIZED TO PAY THE EMPLOYEE TRAVEL AND SUBSISTENCE?  YES  NO

HAVE ARRANGEMENTS BEEN MADE FOR THE EMPLOYEE TO TAKE ANNUAL LEAVE OR LEAVE WITHOUT PAY

TO RENDER THE SERVICES DESCRIBED?  YES  NO

APPROVED  DISAPPROVED

AUTHORIZED EMPLOYING AGENCY SIGNATURE

DATE