REQUEST FOR DUAL EMPLOYMENT

101KAR 2:095 SECTION 4(1) States:

> An employee holding a full-time position with the Commonwealth shall not hold another state position except upon recommendation of the Appointing Authority and the written approval of the Secretary of the Personnel Cabinet.

Therefore, we would like to request prior approval to dually appoint _____ to the position of _____, effective _____. We understand if this employee goes into overtime, both agencies agree to pay the weighted, average salary. This approval form shall be signed by all parties and submitted as supporting documentation along with the P-1 form.

_____, _____
Signature of Appointing Authority (Primary Agency) Date

_____, _____
Signature of Appointing Authority (Secondary Agency) Date

_____, _____
Approval of Secretary of the Personnel Cabinet Date