Request for Approval of Secondary Employment

Please fill in a new form for each secondary employment.

Please check accordingly:

- Report of or request for approval of a secondary employment
- Request to use infrastructure, staff or materials of the university for a secondary employment
- Report of changes in accordance with section 64 subsection 4 of the Civil Service Act of the Land of Baden-Württemberg (LBG)

A. Personal Data

- Last name, first name:
- Type of employment: civil servant, public employee
- Department:
- Type of contract: full time, part time, on leave of absence

B. Engaging in a Secondary Employment

I intend to engage in the following secondary employment. I hereby report / request permission to engage in the following secondary employment. (If approval is required.)

1) Type of secondary employment
   - Teaching assignment:
   - Consulting activities in the field of:
   - Evaluation of:
   - Employment as:
   - Other:

2) Client (including address)
   - Company:
   - University/higher education institution:
   - Other:

3) Planned duration of secondary employment (Please indicate exact dates.)
   - From: until:

4) Hours per week, including travel and preparation time
   - (e.g. 2 credit hours with 2 additional travel and preparation hours per week, 2-3 hours weekly)
   - I engage in the secondary employment:
     - during my regular work time.
     - outside of my regular work time.
   - Day of the week: from until

5) Gross remuneration amount:
   - EUR per month and/or EUR per year
   - (If you do not know the exact amount, please indicate an approximate amount; the gross remuneration includes every compensation, monetary or in-kind, received for services rendered in the course of the secondary employment)

6) Responsibilities of the primary employment
   - will not be adversely affected.
   - will be affected. Please explain.

7) I am engaged in other secondary employments:
   - I am engaged in the following secondary employments (already approved/generally approved/notified). Please include the number of working hours required for each activity.
8) Documentation
The following documents provide information on the type and extent of the secondary employment, the employer and the remuneration:

C Use of Infrastructure, Staff or Material

In order to engage in the above-named secondary employment (including secondary employment that does not require approval),

☐ I will not use infrastructure, staff or material from the university.
☐ I request to make use of infrastructure, staff or material as listed.

1) Staff:
   Last name, first name: ..............................................................................................................................
   Tasks (e.g. desk work): ...........................................................................................................................
   Extent (e.g. 2 hours per day): .................................................................................................................

2) Infrastructure:
   Type (e.g. room, room number): ...........................................................................................................
   Extent (e.g. 5 hours per week): ................................................................................................................

3) Material:
   Type (e.g. paper): .................................................................................................................................
   Amount (e.g. 10 sheets per day): ............................................................................................................

D Report of Changes According to Section 64 Subsection 4 LBG

With regard to the secondary employment that I have reported on ...........................................(date), the following changes in terms of type of activity, extent, employer, or remuneration have materialized:

............................................................................................................................................................

Mannheim, ........................................................ ........................................................
(Signature of Employee)

E Statement of the Superior

Statement on the secondary employment: Are the official responsibilities, the impartiality and the objectivity of the employee or public interest in any way compromised?

☐ I approve of the above-named secondary employment.
☐ I have taken note of the report of changes.
☐ I have the following concerns regarding the secondary employment: ..........................................................

City, Date ..............................................................

..............................................................
(Speaker of Department)