RUTGERS POLICY

Section: 60.9.21

Section Title: Legacy UMDNJ policies associated with Human Resources

Policy Name: Outside Employment

Formerly Book: 00-01-30-10:00

Approval Authority: Senior Vice President for Administration

Responsible Executive: Senior Vice President for Administration

Responsible Office: University Human Resources

Originally Issued: 7/1/1987

Revisions: 7/1/2013; 10/10/2013 (Updated title)

Errors or changes? Contact: policies@hr.rutgers.edu

1. Policy Statement
   The policy covers Rutgers University employees who are employed within legacy UMDNJ positions.

2. Reason for Policy
   To provide guidelines to assist legacy UMDNJ departments/units.

3. Who Should Read This Policy
   All Rutgers employees who are employed in legacy UMDNJ positions.

4. Related Documents
   N/A

5. Contacts
   University Human Resources: 848-932-3020

6. The Policy

60.9.21 OUTSIDE EMPLOYMENT

A. Requirements

1. This covers employees within legacy UMDNJ positions. The primary work obligation of a full or part-time officer, dean, faculty administrator, faculty, staff member or housestaff of Rutgers Health Sciences; other Rutgers units is to the University, school or other operational unit where he or she is employed.

2. Full or part-time employees, including Rutgers Biomedical Health Sciences Chancellors, deans, faculty administrators, faculty, staff members and housestaff
may engage in outside employment only if appropriate approval is obtained from
the immediate supervisor and if the outside employment:

a. does not constitute a conflict of interest,

b. does not occur at a time when the officer, dean, faculty administrator,
   faculty, staff member or housestaff is expected to perform his or her
   University duties,

c. does not diminish the officer, dean, faculty administrator, faculty, staff
   member or housestaff’s efficiency in performing his or her primary work
   obligation at the University.

3. All full and part time legacy UMDNJ position employees must obtain advance
   approval before commencing outside employment by submitting a completed
   Request for Approval of Outside Employment and following the submission
   process indicated below:

a. To the Chancellor, Vice; Associate; and Assistant Chancellors and for
   those administrative staff reporting directly to the Chancellor.

b. To the pertinent Senior Vice President for those Deans, Vice Presidents
   and other staff reporting directly to a Senior Vice President.

c. To the pertinent Dean for all faculty administrators, faculty, school staff
   and housestaff. This shall include any outside professional practice of
   full or part-time faculty members. Outside private clinical practice by
   faculty members is subject to additional constraints as specified in each
   School's Faculty Practice Plan.

d. For all other employees, to their immediate supervisor.

e. If housestaff plan to engage in outside employment, they are required to
   receive approval of outside employment in advance of commencing such
   employment from their Program Director, Department Chair and Dean
   and have the forms forwarded to the Office of the Dean.

B. Responsibilities

1. All full or part-time employees including officers, deans, faculty administrators,
   faculty, staff members and housestaff are responsible for reading the University
   policies on Code of Ethics (60.4.2) and Outside Employment (60.9.21) and
   completing, signing, dating and submitting the Request for Approval of Outside
   Employment found online at http://uhr.rutgers.edu/policies-resources/forms to the
   individual described in Paragraph IV. A. 3a - e above.

2. Where there is no outside employment, this should be indicated by completing
   the Certification of No Outside Employment section of the form that states, “I do
   not have outside employment.”

3. Part-time clinical faculty whose only outside employment is their clinical practice
   may indicate this by checking the appropriate box; no additional information is
   required.

4. Employment at the University is contingent upon disclosure of outside
   employment or certification of non-employment in compliance with this policy.
   Employment shall not be offered to any prospective employee whose outside
   employment constitutes a conflict of interest as set forth in University policy.
Forms are to be provided during personnel processing/upon appointment by the following offices:

- the campus Human Resources Office for staff;
- the Office of the Dean for each school for faculty; and the
- the Office of Graduate Medical/Dental Education for each school for housestaff.

5. For staff new hires, Human Resources will provide to the immediate supervisor the original signed form for retention in the departmental file and retain a copy in the new hire’s personnel file. The schools shall retain the original forms for faculty administrators, faculty and school staff. The Offices of Graduate Medical/Dental Education shall retain the original for each school for housestaff.

6. Annual Updates: All full-time or part-time employees, including officers, deans, faculty administrators, faculty, staff members and housestaff shall update their outside employment status annually during the performance appraisal process by completing the Outside Employment Certification annexed to the Performance Appraisal forms. Any change in status prior to the annual update must be reported. Updates are to be retained in employee departmental files by the schools/units.

On an annual basis, housestaff will receive Request for Approval of Outside Employment/Certification of No Outside Employment and written notice regarding their forms from their Program Directors or Department Chairs. Housestaff will not have to submit a form if their outside employment status did not change since their last submission or if their current outside employment has been filed and approved on said form.

7. Recipients of Requests for Approval of Outside Employment (Section IV.A.3a-e. above) shall review these requests, and discuss them with employees to ensure no conflict exists in accordance with the terms of this policy and the University’s ethics.

8. If the supervisor determines that the proposed outside employment presents a conflict, a plan of action to resolve the conflict must be developed and documented for the employee’s file within ten (10) business days. It is the immediate supervisor’s responsibility to ensure that the agreed upon action is taken and that the employee complies with this policy and the University’s Code of Ethics.

9. The resolution by the supervisor of a conflict between an outside employment and Rutgers Health Sciences employment may involve disapproval of the outside employment.

C. The following are exceptions to this policy:

1. This policy shall not apply to outside employment undertaken by a full or part-time officer, faculty administrator, faculty, staff member or housestaff during his or her annual leave or vacation periods, except that no such officer, faculty administrator, faculty, staff member or housestaff may engage at any time in outside employment that constitutes a conflict of interest.

2. This policy shall not apply to outside employment as defined in Sections 18A:6-8.1 and 18A:6-8.2 of the New Jersey Statutes. Such outside employment, however, should be reported to the pertinent offices as detailed in Section IV A. 3 above. These statutes are as follows:
a. 18A: 6-8.1 Leave of certain employees (officers, faculty or staff members) to serve in legislature.

Any person employed by a public educational system or institution in a position which requires a certificate issued by the State Board of Examiners, or is employed in a professional education capacity by a school, college or university which is either tax-supported or operated under contract with the State or on behalf of the State, who is a member of the senate or general assembly of the State of New Jersey, shall be entitled to time off from his or her duties as such officer, faculty or staff member, without loss of pay, during the periods of his or her attendance at regular or special sessions of the legislature and hearing or meetings of any legislature committee or commission.

b. 18A: 6-8.2 Leave of certain employees (officers, faculty or staff members) to serve on board of chosen freeholders.

Any person employed by a public educational system or institution in a position which requires a certificate issued by the State Board of Examiners or is employed in a professional educational capacity by a school, college or university which is either tax-supported or operated under contract with the State or on behalf of the State who is a member of the board of chosen freeholders of any county of this state, shall be entitled to time off from his or her duties as such officer, faculty or staff member, without pay, during the periods of his or her attendance at regular or special meetings of the board and of any committee thereof and at such other times as he or she shall be engaged in performing the necessary functions and duties of his or her office as a member of the board.

D. Failure of University officers, faculty administrators, faculty, staff members or housestaff to comply with this policy shall result in disciplinary action up to and including termination.

V. EXHIBITS

A. Request for Approval of Outside Employment/Certification of No Outside Employment - Staff

B. Request for Approval of Outside Employment/Certification of Outside Employment - Faculty

C. Declaration/Request for Approval of Outside Employment – Housestaff

D. Outside Employment Certification – (For Use at Annual Performance Appraisal)
**EXHIBIT A**
RUTGERS HEALTH SCIENCES
REQUEST FOR APPROVAL OF OUTSIDE EMPLOYMENT/
CERTIFICATION OF NO OUTSIDE EMPLOYMENT

**STAFF**

This form should be completed by the Senior Vice Presidents, Vice Presidents, Associate Vice Presidents, Assistant Vice Presidents and all other Staff

<table>
<thead>
<tr>
<th>Date: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name ___________________________</td>
</tr>
<tr>
<td>(Please Print) Title ___________________________</td>
</tr>
<tr>
<td>Unit/School ______________________</td>
</tr>
<tr>
<td>Dept ___________________________ Location ______________________</td>
</tr>
</tbody>
</table>

### OUTSIDE EMPLOYMENT INFORMATION

<table>
<thead>
<tr>
<th>Name of Employer ___________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone ___________________________</td>
</tr>
<tr>
<td>Address ___________________________</td>
</tr>
<tr>
<td>Title ___________________________ Type of Work Performed ___________________________</td>
</tr>
<tr>
<td>Days &amp; Hours of Work _______________________</td>
</tr>
<tr>
<td>Period of Outside Employment: From ___________ To ___________</td>
</tr>
</tbody>
</table>

*(Attach additional sheets if necessary.)*

I have read and understand the University's policies on Code of Ethics and Outside Employment. I attest that the information provided above is true.

____________________________
Employee Signature

____________________________
Immediate Supervisor

I hereby certify that I do not have any outside employment.

____________________________
Employee Signature

____________________________
Immediate Supervisor

All regulations and procedures are subject to amendment.
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**EXHIBIT B**
RUTGERS HEALTH SCIENCES
REQUEST FOR APPROVAL OF OUTSIDE EMPLOYMENT/
CERTIFICATION OF OUTSIDE EMPLOYMENT

**FACULTY**

This form should be completed by Deans, Faculty Administrators and Faculty

Date: _____________________

Name
__________________________________
Title__________________________________
(please print)

School
________________________________________________________________________

Dept. _____________________________ Campus _____________________________

**OUTSIDE EMPLOYMENT INFORMATION**

Name of Employer_________________________ Telephone ______________________
Address
________________________________________________________________________

Title _________________________________ Type of Work Performed ________________

Days & Hours of Work
________________________________________________________________________

Period of Outside Employment: From __________________ To ______________________

(Attach additional sheets if necessary.)

I have read and understand the University's policies on Code of Ethics and Outside Employment. I attest that the information provided above is true.

Employee Signature

<table>
<thead>
<tr>
<th>I have reviewed this request with the employee and (check one)</th>
<th>______ there is no conflict;</th>
<th>______ the conflict has been resolved and documented.</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Approved</td>
<td>□ Denied</td>
<td></td>
</tr>
</tbody>
</table>

Date/ Sr. Vice President, Academic Affairs/Dean

**CERTIFICATION OF OUTSIDE EMPLOYMENT**

PLEASE CHECK ONE: ______ No, I do not have outside employment.

______ I am a part-time clinical faculty member and my only outside employment is my clinical practice.

Employee Signature

_________________________________________  Dean

All regulations and procedures are subject to amendment.
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EXHIBIT C  
RUTGERS HEALTH SCIENCES  
DECLARATION/REQUEST FOR APPROVAL OF OUTSIDE EMPLOYMENT  

HOUSESTAFF

PLEASE NOTE THAT BEFORE ENGAGING IN OUTSIDE EMPLOYMENT APPROVAL IS REQUIRED FROM YOUR PROGRAM DIRECTOR, DEPARTMENT CHAIR AND DEAN

Date: __________________________

Name ___________________________________________ Title ___________________________________________

(please print)

School __________________________________________ Location ___________________________________________

PLEASE CHECK ONE:    ______ Yes, I am requesting outside employment. (Complete information requested below.)  
                        ______ No, I do not have outside employment.

NOTE: THERE IS NO MALPRACTICE COVERAGE FROM THE UNIVERSITY FOR OUTSIDE EMPLOYMENT

OUTSIDE EMPLOYMENT INFORMATION

Name of Employer __________________________ Telephone __________________________

Address __________________________________________

Title __________________________ Type of Work Performed __________________________

Days & Hours of Work __________________________

Period of Outside Employment: From __________________________ To __________________________

(Attach additional sheets if necessary.)

I have read and understand the University’s policies on Code of Ethics and Outside Employment. I attest that the information provided above is true.

Housestaff Signature __________________________

I have reviewed this request with the employee and (check one) ______there is no conflict;  
______the conflict has been resolved and documented.  

☐ Approved ☐ Denied

_____________________________________________ Date/ Program Director

_____________________________________________ Department Chair

_____________________________________________ Dean

All regulations and procedures are subject to amendment.

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EXHIBIT D
RUTGERS HEALTH SCIENCES
OUTSIDE EMPLOYMENT CERTIFICATION

To be Completed at Annual Performance Appraisals

All full and part time officers, deans, faculty administrators, faculty, staff and housestaff must annually update their Outside Employment status during the course of employment/tenure with the University. Please review the following and check the statement which accurately describes your status.

☐ I certify that my outside employment status has not changed from the date of my last certification.

☐ I certify that I have updated the changes to my Outside Employment status with my supervisor. A copy of the form has been placed in my departmental employee file.

Print Name ____________________  Signature ____________________

Employee ID ____________________  Date ____________________

ATTACH THIS CERTIFICATION TO THE ANNUAL PERFORMANCE APPRAISAL