



## 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](mailto: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**

Date: \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_  
(Please Print)

Unit/School \_\_\_\_\_

Dept \_\_\_\_\_ Location \_\_\_\_\_

**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

I have reviewed this request with the employee and (check one) _____ there is no conflict; _____ the conflict has been resolved and documented.	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____ Date/ Immediate Supervisor	
_____ President, Senior Vice President, Vice President or Dean	

**CERTIFICATION OF NO OUTSIDE EMPLOYMENT**

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

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Immediate Supervisor**

**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

I have reviewed this request with the employee and (check one) _____ there is no conflict; _____ the conflict has been resolved and documented.	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____ 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**

**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 \_\_\_\_\_

Dept \_\_\_\_\_ 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

**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**