

REQUEST FOR PERMISSION TO ENGAGE IN SECONDARY CONTRACT OF

Employee Details:

Name: _____

Post Title: _____

Centre: _____

Secondary Employment Details:

Nature of Work: _____

Hours per week: _____

Start / End Date: From: _____ To: _____

Additional Information: _____

Declaration: I confirm that the nature of the work outlined above will not interfere with the fulfilling of the duties and responsibilities to the Cork ETB as outlined in the Contract of Employment and will not give rise to contravention of the Cork ETB Code of Ethics.

I also acknowledge that the contract with Cork ETB may also be terminated in the event that the work, when calculated in the aggregate, exceeds the limit of 48 hours for the previous relevant period as set out in Section 15 of the Organisation of Working Time Act, 1997. Any such decision to terminate the contract will be taken in accordance with appropriate procedures.

Signed: _____ Date: _____

OFFICE USE ONLY

Principal/Head of Section comments: I support do not support the above application.

Reason: _____

Signed: _____ Date: _____

Decision of CEO: Application granted: Yes No

Reason: Permission granted on the basis that the work / hours

Indicated will not interfere with CETB employment needs

Signed: _____ Date: _____