

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 ON	NLY	
Principal/Head of Section comments:	l support 🗌 do not su	upport 🗌 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:		