NAVAJO COUNTY
Outside Employment Declaration

EMPLOYEE NAME: (Print) _____

POSITION: _____DEPARTMENT_____

In accordance with Navajo County policy, I hereby declare the following outside employment:

EMPLOYER NAME: _____

ADDRESS: _____

POSITION_____DAYS/HOURS OF WORK_____

Brief Description of Work Performed: _____

_____

_____

EMPLOYEE SIGNATURE: _____DATE: _____

Acknowledged:

Elected Official/Department Director: _____ Date: _____

Comments:

_____

_____

_____

Original: *Employee Personnel File*