

## State of New Mexico – Outside Employment

Employee Information		
Name:	Employee ID:	
Classification:	Position Number:	
Employee Certification		
Check the statement that is applicable to you:		
I am currently NOT engaged in outside employment (or in the process of obtaining such) nor do I have a conflict any financial interest in a business which may be affected by the actions of this agency.		
I have indicated below any outside employment or conflict of interest pursuant to the provisions of the Governor's Code of Conduct.		
Should I have a financial interest either now or in the future which I am required to report to the Secretary of State under the Financial Disclosure Act, I will do so.		
Outside Employment		
In addition to your position with this agency, are you currently employed or are now arranging for (including consultant work) such outside employment. This agency's division management will make the final determination of approval/denial.		
Name of Business		
Address (No., Street, PO Box and/or Rural Route) City	State Zip Code	
Work Performed:		
Conflict of Interest Code		
Complete the following if you (or your spouse) have employment or financial interest in a business which may be affected by the actions of (State Personnel Office) (including ownership or management property rented to the department, its clients, or contractors). The agency's Cabinet Secretary/Director will make the final determination as to whether this is a conflict of interest and appropriate action required.		
Name of Business		
Address (No., Street, PO Box and/or Rural Route) City	State Zip Code	
Work Performed		
<ul> <li>Attach additional pages for other employment or conflicts of interest.</li> </ul>		
Signatures		
Employee Signature: Date:		
Supervisor Signature: Date:	☐ Approve ☐ Deny	
Agency Head Signature: Date:	☐ Approve ☐ Deny	