APPLICATION AND APPROVAL FOR OFF-DUTY EMPLOYMENT

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 974; 10 U.S.C. 8013; Executive Order 9397; DoD 5500.7-R, Sections 2-206 and 2-303.

PRINCIPAL PURPOSE(S): Provide information for commanders to evaluate proposed off-duty employment, grant approval, and determine impact on duty performance.

| ROUTINE USE(S): Records may be disclosed for any of the blanket routine uses published by the Air Force. DISCLOSURE: Failure to provide the information could result in disapproval of request for off-duty employment. | | | | | | |
|---|----------------------------------|---|---|---------------------|---|--|
| SECTION I APPLICANT DATA AND CERTIFICATION (Completed by Applicant) | | | | | | |
| 1. LAST NAME, FIRST NAM | | | | 2. GRADE | 3. AFSC | |
| 4. O | RGANIZ | ZATION OFFICE | SYMBOL ADDRESS | 5. DUTY PHONE | 6. DUTY TITLE | |
| | | | | | | |
| 7a. NAME OF EMPLOYER | | | | | 7b. BUSINESS ADDRESS | |
| 7c. IS EMPLOYER A DEPARTMENT OF DEFENSE CONTRACTOR? | | | | 7d. PHONE NUMBER | | |
| |] (| 1) YES | (2) NO (3) DON'T KNOW | | | |
| 8. TI | TLE OF | POSITION OF | OFF-DUTY EMPLOYMENT | 9. OFF-DUTY PERIODS | OF EMPLOYMENT (Days per week; hours per day) | |
| 10. J | OB DES | SCRIPTION (Cor | ntinue on reverse side) | 11. NORMAL PERIODS | OF MILITARY DUTY (Days per week; hours per day) | |
| I certify that I understand the applicable provisions of the Joint Ethics Regulation (DoD 5500.7-R). I further certify that the off-duty employment for which I am applying (mark applicable block): (Note: explain in detail on the reverse of this form any answer that results in checking a box "will." Checking a box "will" does not automatically result in disapproval, but does require an explanation). | | | | | | |
| a. | NOT b. | | | | | |
| | | | ring discredit upon the Air Force, Department of Defense or U.S. Government. | | | |
| | | 13. Interfere with or be incompatible with my government duties. | | | | |
| | | 14. Interfere with the customary or regular employment of local civilians. (Enlisted members only) | | | | |
| | | 15. Require absences during normal military duty hours. | | | | |
| | | 16. Involve any expense to the Air Force or use of government facilities, property or manpower.17. Endanger my safety or health. | | | | |
| | | | 8. Involve the use of my military title or representation before any federal agency. | | | |
| | | | nvolve employment with an organization now involved in a strike. | | | |
| | | 20. Place me in a position that might be incompatible with my rank, position or assignment. | | | | |
| | | 21. Require action at any time as a sales agent for the purpose of personal commercial solicitation of military personnel junior in rank or grade. 22. Appear to involve a conflict of interest. | | | | |
| | | 23. Involve w | working for a firm or other entity that is engaged, or is endeavoring to engage, in business transactions of any sort with an he Department of Defense. | | | |
| 24. Violate any U.S., state or local law; ordinance; or Air Force regulation or instruction. | | | | tion. | | |
| 25a. DATE SIGNED 25b. SIGNATURE OF APPLICANT | | | | | | |
| SECTION II SUPERVISOR'S RECOMMENDATION | | | | | | |
| 26. RECOMMEND APPROVAL. I HAVE PERSONALLY INTERVIEWED THE APPLICANT AND I HAVE NO OBJECTION TO THE REQUESTED OFF-DUTY EMPLOYMENT. | | | | | | |
| 27. RECOMMEND DISAPPROVAL (Explain). | | | | | | |
| 28a. DATE SIGNED | | | 28b. NAME AND GRADE OF SUPERVISOR | | 28c. SIGNATURE | |
| SECTION III | | | JUDGE ADVOCATE RECOMMENDATION | | | |
| | 29. APPROVAL | | 31. REMARKS (Continue on reverse side) | | | |
| | 1 | ISAPPROVAL | 22h NAME AND ODADE | | 22a CICNATURE | |
| 32a. DATE SIGNED | | | 32b. NAME AND GRADE | | 32c. SIGNATURE | |
| SECTION IV | | | APPROVING AUTHORITY ACTION (Completed by Unit Commander or Delegatee) | | | |
| | 33. APPROVED | | 35. REMARKS (Continue on reverse side) | | | |
| 360 | 34. DISAPPROVED 36a. DATE SIGNED | | 365 NAME CRADE AND TITLE | | 36c. SIGNATURE | |
| JOGA. DATE GIGNED | | JIGNEU | 36b. NAME, GRADE AND TITLE | | JUL. SIGNATURE | |

DAF 3902, 20230111

Prescribed by: DAFI 36-147

