City of New Orleans
Outside Employer Authorization Form – Law Department
Unclassified Employees

Employee Information:

Last Name	First Name	Middle Initial

Employee Work Information:

Department	Division	Work Number

Employee Work Location:

Address of Work Location	Number of Work Hours/Per Week

Proposed Outside Employer Information:

Name of Outside Employer	Address

Dates and hours per date proposed for short-term outside employment.

Duties of outside employment:

Will this proposed outside employment create any conflicts of interest with your work for the City of New Orleans or could it be reasonably perceived by others to create a conflict: Yes ☐ No ☐

If Yes, please explain in detail:

Employee acknowledges that he/she has read the La. Code of Governmental Ethics, and in particular, is familiar with the La. R.S. 42L1101 et seq. regarding certain employment prohibition by public employees.

Employee Signature	Date

City Attorney	Date

Approved ☐ Disapproved ☐