**DUAL EMPLOYMENT/OUTSIDE ACTIVITY FORM**

Refer to reverse side for directions.

1. Are you self-employed or an employee of any business or profession, public or private outside NYC Transit, MaBSTOA or SIR?  
   - [Yes] [No]

2. Are you a policy-maker (refer to MTA Code of Ethics) and requesting approval for any of the following?  
   - [ ] Private Employment $1000-$4000  
   - [ ] Private Employment over $4000  
   - [ ] Public Employment over $4000  
   - If private or public employment is over $4000, how much will you earn [Insert Amount]  
   - [ ] Director/Officer Profit Corporation  
   - [ ] Hold Public Office  
   - [ ] Elected  
   - [ ] Appointed  
   - [ ] Partisan  
   - [ ] Non-partisan

3. Have you answered yes to question 1 or checked any of the boxes in question 2? If so, you are required to complete this form. (Attach full descriptions of both NYC Transit position and outside activity.)

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Pass No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Address</td>
<td>City</td>
<td>State</td>
<td>Zip</td>
</tr>
<tr>
<td>Transit Title</td>
<td>Authority</td>
<td>TA/OA/SIR</td>
<td>Work Hours</td>
</tr>
<tr>
<td>Work Phone</td>
<td>Dept.</td>
<td>Location</td>
<td></td>
</tr>
</tbody>
</table>

Outside Activity  
Address | City | State | Zip |
| Type of Business | Start Date |
| Position | Work Hours | Work Days |

Does the company, firm or individual that you wish to work for conduct business with any of the following:  
1) NYCT or other MTA agency as a prime contractor?  [ ] Yes [ ] No  
2) A subcontractor to a NYCT prime contractor or other MTA agency prime contractor?  [ ] Yes [ ] No  
3) Any other NYCT employee or other MTA agency employee?  [ ] Yes [ ] No

Employee Signature  
Date

I have reviewed the above and all attachments and have determined that the proposed outside activity will [ ] will not [ ] (check one) interfere with this employee's discharge of his duties with NYCT/MaBSTOA/SIR.

Department Head Signature  
Name (print or type)  
Date

**FOR POLICY MAKERS ONLY.** For authorization, send this form to NYC Transit Ethics Committee, 130 Livingston Plaza, Room 1207. The NYCT gives its consent to the above-stated outside activity, having determined that this request is appropriate, considering Sections 73 and 74 of the Public Officers Law, this agency's applicable policies, procedures or rules and regulations governing employee conduct, and other factors such as (specify, if appropriate):

Authorized Signature  
Name (print or type)  
Date

Human Resource Forms (REV. 07/09)