

MEMORANDUM

From:

To: Force Surgeon, Naval Surface Force Atlantic

Subj: OFF-DUTY CIVILIAN EMPLOYMENT ACKNOWLEDGMENT

Ref: (a) COMNAVSURFPAC/COMNAVSURFLANTINST 6320.2

1. I am or am not (check one) presently engaged in off-duty civilian employment.
2. I have or do not have (check one) written permission of my Commanding Officer or Officer in Charge to engage in off-duty civilian employment, per reference (a).
3. I acknowledge I must immediately notify my Privileging Authority of any change to my civilian employment status.
4. I understand specific rules for civilian employment apply to healthcare professionals and appropriate request forms are available from my Medical Services Staff Professional (MSSP).
5. I understand that if I have been granted permission to engage in off-duty civilian employment, I must submit a log of off-duty civilian employment to my Privileging Authority on a quarterly basis, including for periods in which I had zero off-duty civilian employment.
6. I am aware engaging in off-duty employment without the prior written approval of my Commanding Officer may result in punitive/administration actions for violating Health Affairs Policy 96-050.
7. I realize my Commanding Officer may impose limitations on civilian employment (hours, location, leave status, etc) which are more strict than those outlined in Health Affairs Policy 96-050 and standard forms utilized in the Fleet.

Signature

Date