**PERMIT TO ENGAGE IN PRIVATE PRACTICE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University President

This University

 I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ would like to seek your permission and approval to allow me to engage in

* **Private Practice of Profession** (Pls. specify the following)
* Name of Profession: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Nature of Service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Schedule of Private Practice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Private Business** (Pls. specify the following)
* Name of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Schedule in attending Private Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

outside of my official time in the University for Academic Year \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_ Semester. I am fully aware and understand the CSC MC No. 24, s. 2017 known as 2017 Omnibus Rules on Appointments and Other Human Resource Actions specifically Section 136 which states that “*No Officer or employee, whether in a permanent or regular capacity, temporary, casual, or hold-over, shall engage directly or indirectly in any private business or practice of profession*”. Moreover, I am willing to adhere to the other conditions prescribed in Sec. 136 to wit:

1. Written permission from the head of agency shall be secured and renewed every semester;
2. Time devoted outside my office hours shall not impair in any way my efficiency as an officer or an employee nor pose a conflict or tend to conflict with my official functions and must be fixed by the head of agency; and
3. Government facilities, equipment and supplies shall not be used while I am engaged in private business or practice of profession.

In this connection, I am submitting the following documents:

1. Copy of Schedule and Official Time at Tarlac State University
2. Employment Contract/Certificate of Employment (If applicable)

Further, I understand that a separate permit to teach outside the University, shall be secured, if applicable.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name and Signature College

**Recommending Approval:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Director, College Dean VP, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPROVED:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President