



Outside Consulting Authorization Form

Smith Employee ID Number: _____

Employee Name: _____

What is the nature of your Outside Consulting assignment? _____

What relevance does this have to your current role at Smith? _____

Name of your client: _____

Identify the dates you will be doing the Outside Consulting: _____

I have read both the Consulting and Conflict of Interest policies and agree that this outside consulting arrangement is in compliance with these policies.

Employees' Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____