



# Statewide Human Resources Management Dual Employment Request Form

Form #: CT-HR-25

Revised: 5/2017

The hiring agency initiates a Dual Employment Request (Form CT-HR-25) when hiring a current state employee into another state assignment (and the employee intends to continue working in his/her existing assignment). This form is required in accordance with C.G.S. Section 5-208a and General Letter 204. See Instructions on Page 1.

| <b>Today's Date</b>  |                                     | <b>Name of Employee</b>   |  |                     | <b>Empl ID</b>  | <b>FLSA Status</b><br>EXEMPT |
|--|-------------------------------------|---|--|---------------------|---|------------------------------|
| Core-CT Record #   | Agency and Assignment Work Location | Job title or Major Duties<br>Check if duties reflected on DAS class specification (see Instructions for more information) | Official Job Title or Course ID (Higher Education) | Higher Ed Load Hrs. | Anticipated 1 <sup>st</sup> Day of work in (new) Assignment |                              |
| 0  |                                     |   |  |                     |   |                              |
| 1  |                                     |   |  |                     |   |                              |
| 2  |                                     |   |  |                     |   |                              |
| 3  |                                     |   |  |                     |   |                              |
| <b>Attach additional information including major duties and Core-CT Records, as necessary.</b> |                                     |   |  |                     |   |                              |

| Core-CT Record # | Online Course?<br>✓ | Occasional or Sporadic?<br>✓ | Work Schedule varies; no conflict<br>✓ | Course/Assignment Schedule | Workweek: Seven consecutive days beginning on Friday at 12:01 AM through midnight Thursday |      |      |      |       |      |       |
|------------------|---------------------|------------------------------|--|----------------------------|--|------|------|------|-------|------|-------|
|                  |                     |                              |  |                            | Fri.   | Sat. | Sun. | Mon. | Tues. | Wed. | Thur. |
| 0                |                     |                              |  | Start Time:                |  |      |      |      |       |      |       |
|                  |                     |                              |  | Unpaid Break:              |  |      |      |      |       |      |       |
|                  |                     |                              |  | End Time:                  |  |      |      |      |       |      |       |
| 1                |                     |                              |  | Start Time:                |  |      |      |      |       |      |       |
|                  |                     |                              |  | Unpaid Break:              |  |      |      |      |       |      |       |
|                  |                     |                              |  | End Time:                  |  |      |      |      |       |      |       |
| 2                |                     |                              |  | Start Time:                |  |      |      |      |       |      |       |
|                  |                     |                              |  | Unpaid Break:              |  |      |      |      |       |      |       |
|                  |                     |                              |  | End Time:                  |  |      |      |      |       |      |       |
| 3                |                     |                              |  | Start Time:                |  |      |      |      |       |      |       |
|                  |                     |                              |  | Unpaid Break:              |  |      |      |      |       |      |       |
|                  |                     |                              |  | End Time:                  |  |      |      |      |       |      |       |

## EMPLOYEE ACKNOWLEDGEMENT

The employee must read and initial each of the following statements as they apply to the employee's dual/multiple employment assignments and acknowledge all information by signing below:

### GENERAL:

\_\_\_ I have been advised General Letter 204 – Dual Employment is available online and understand I should address my questions about dual/multiple employment to the Human Resources Office in any of the employing agencies listed on this form.

\_\_\_ I have reviewed all of the assignments on this form and attest the information presented reflects all of my current work assignments with the State of Connecticut (including the Judicial and Legislative Branches and quasi-public agencies where employees are construed to be state employees).

\_\_\_ I have reviewed the work schedule information and confirm there is no time conflict between assignments or duplication of hours worked in any of the assignments on this form. I understand I am not to perform work for one assignment while working in another assignment and that I cannot take paid or unpaid leave time from one assignment in order to travel or perform duties of another assignment.

\_\_\_ I have reviewed the State Ethics Policy, have had an opportunity to raise questions to the Ethics Officer in my agency, and certify no conflicts of interest exist.

### COMPENSATION:

\_\_\_ I understand I am **ineligible** for overtime as my FLSA Status is Exempt

\_\_\_ I understand I am **eligible** for overtime as my FLSA Status is Nonexempt

\_\_\_ I further understand that I will receive overtime pay for hours actually worked over 40 in a week and that I should inform Human Resources when I work more than the scheduled hours indicated on this form.

\_\_\_ I understand the overtime rate for hours worked over 40 in a week will vary because it is based on the number of hours worked in each assignment (“weighted average”). The approximate overtime rate is calculated at \_\_\_\_\_ hourly.

#### Weighted Average Overtime Calculation

a.) Job 1 # Hours x Pay Rate + Job 2 # Hours x Pay Rate = Total Straight-time Pay

b.) Total Straight-time Pay / Total Hours = Weighted Average Regular Rate of Pay

c.) Weighted Average Regular Rate of Pay / 2 = Sub-total

d.) Sub-total from ‘c.’ x Hours over 40 = Total Overtime Amount

Reason: FLSA requires the payment of overtime at time and one half for all hours actually worked over 40 in a week to eligible employees. The hours over 40 have already been paid as straight time by each agency; now the additional “half” must be added to the straight time already paid, using the weighted average rate.

\_\_\_ I understand this dual/multiple employment assignment is approved until \_\_\_\_\_ (Maximum length: either the end of the semester for higher education teaching assignments or up to 12 months for non-higher education assignments or higher education non-teaching assignments).

\_\_\_ I have been informed the continuation of my eligibility to work in the dual assignment is contingent upon there being no change to assigned work schedules, job duties or job titles in any of the assignments indicated, and my future acceptance of an additional assignment(s). **I understand that I must immediately inform Human Resources of any change before it occurs** and that implementation of such change will require a new CT-HR-25. I understand the result of any change in information presented on this CT-HR-25 may be cause for termination of assignment(s) prior to the aforementioned date.

Print Employee's Name

Employee's Signature

Date

## EMPLOYING AGENCY'S OR AGENCIES' CERTIFICATION

By signing this form, agencies certify the following:

- Duties and responsibilities of both the primary and secondary positions have been reviewed in accordance with General Letter 204 and by applying the US Department of Labor (US DOL) Fair Labor Standards Act (FLSA) Tests for exemption to determine overtime liability.
  - Following the review of duties, I further certify (check one):
    - The employee's FLSA Status is Exempt; the employee will **never** incur overtime.
    - The employee's FLSA Status is Nonexempt but the combined hours of all assignments are far below 40 and will **never** exceed 40 in a week. Therefore, there is **no possibility** of the employee incurring overtime.
    - The employee's FLSA Status is Nonexempt and there is a **possibility** the combined hours of all assignments **may** exceed 40 in a week. Therefore, the employee **may** incur overtime. A weekly review of all hours actually worked will be conducted by all agencies. Approval from each Fiscal Director has been received; DAS approval is required.
    - The employee's FLSA Status is Nonexempt. The employee will **definitely** work more than 40 combined hours in a week. A weekly review of all hours actually worked will be conducted by all agencies. Approval from each Fiscal Director has been received; DAS approval is required.
- Duties specified are outside the responsibility of the employee's principal employment.
- Hours worked are documented accurately and have been reviewed to preclude duplicate payment.
- No conflicts of interest exist between services performed.

If for any reason there is a change in the hours and/or days of work indicated, or if there is a change in the employee's job class or dual/multiple assignments, a new CT-HR-25 with the required information will be completed, reviewed and approved, as appropriate by all agencies, Fiscal Managers and DAS. The new fully executed CT-HR-25 will be retained for post-audit.

### Approvals

Signatures below certify all conditions under C.G.S. Sec. 5-208a, General Letter 204 and FLSA Regulations are met. A fully executed copy of the CT-HR-25 along with all relevant materials must be retained by each agency for DAS post-audit purposes.

**This assignment is approved through close of business \_\_\_\_\_.**

**Core-CT Record 0:**

Yes  No \_\_\_\_\_

|                          |                                      |                    |      |
|--------------------------|--------------------------------------|--------------------|------|
| Agency                   | Signature of Agency Head/HR Designee | Official Job Title | Date |
| Approval Fiscal Manager: | Signature                            | Official Job Title | Date |

**Core-CT Record 1:**

Yes  No \_\_\_\_\_

|                          |                                      |                    |      |
|--------------------------|--------------------------------------|--------------------|------|
| Agency                   | Signature of Agency Head/HR Designee | Official Job Title | Date |
| Approval Fiscal Manager: | Signature                            | Official Job Title | Date |

**Core-CT Record 2:**

Yes  No \_\_\_\_\_

|                          |                                      |                    |      |
|--------------------------|--------------------------------------|--------------------|------|
| Agency                   | Signature of Agency Head/HR Designee | Official Job Title | Date |
| Approval Fiscal Manager: | Signature                            | Official Job Title | Date |

**Core-CT Record 3:**

Yes  No \_\_\_\_\_

|                          |                                      |                    |      |
|--------------------------|--------------------------------------|--------------------|------|
| Agency                   | Signature of Agency Head/HR Designee | Official Job Title | Date |
| Approval Fiscal Manager: | Signature                            | Official Job Title | Date |
| Approval from DAS:       | Signature                            | Comments, if any   | Date |