SOUTHERN WEST VIRGINIA COMMUNITY AND TECHNICAL COLLEGE External Professional Activities for Pay Report Form SCP-2562.A

Instructions: In accord with SCP-2562, this form must be completed each year by all full time faculty and professional staff employees. Complete all parts of the form. If you did not engage in external professional activities for pay for the fiscal year specified, write "NONE" across the grid below. Please report all paid activity/employment, including planned activity/employment for the fiscal year. The report for each fiscal year is due in Human Resources by August 31. If you intend to engage in paid professional activity, this form is to be completed no less than ten days before the proposed external professional activity for pay is to begin.

| Name | Title | |
|---|---|---|
| Department/Unit | Fiscal Y | ear |
| Start Date End Date Explanation: Nature of Activity and G | Description of Activity eneral Description of Business/Agency/Organ | nization/Groups/Person |
| Start Date End Date | Description of Activity | |
| Explanation: Nature of Activity and General Description of Business/Agency/Organization/Groups/Person | | |
| Start Date End Date Explanation: Nature of Activity and G | Description of Activity eneral Description of Business/Agency/Organ | nization/Groups/Person |
| Start Date End Date | Description of Activity | |
| Explanation: Nature of Activity and General Description of Business/Agency/Organization/Groups/Person | | |
| Employee Signature and Printed Name | | Date |
| I have reviewed the above activities f Professional Staff. | or compliance with SCP-2562, External Profe | ssional Activities of Faculty and Other |
| Supervisor Signature | | Date |