**ALABAMA STATE UNIVERSITY**
**ADJUNCT INSTRUCTOR**
**NOTICE OF CONCURRENT EMPLOYMENT**

Last four digits of Social Security #_____

I, _____ of the _____
**Department/College**

Am also employed with (by) _____
**Name of Employing Agency**

located at _____
**Address of Employing Agency**

as _____
**Position**

during _____ _____
**Hours of Work** **Days per week**

The employment described above began _____

and is expected to continue through _____

Is your employment in this position covered by either of the following?

a. Hospitalization Insurance _____
**Yes/No**

b. Workman's Compensation _____
**Yes/No**

c. Life Insurance _____
**Yes/No**

d. Teacher's Retirement System of Alabama _____
**Yes/No**

If yes, which (a) Teacher's (b) Employee's (c) Other? _____

_____
**Signature of ASU Employee**

_____
**Date**