

# State Human Resources Policy #E24-105.01

## Dual Employment / Multiple Employment

The language used in this document does not create an employment contract between the employee and the Agency. This document does not create any contractual rights or entitlements. The Agency reserves the right to revise the content of this document, in whole or in part. No promises or assurances, whether written or oral, which are contrary to or inconsistent with the terms of this paragraph create any contract of employment.

### **DEFINITIONS**

Agency – The South Carolina Military Department/Office of the Adjutant General

Dual Employment – An agreement by which an employee within an FTE position with an employing State agency accepts temporary, part-time employment with the same or another State agency.

Multiple Employment - An agreement by which an employee within a non- FTE position with an employing State agency accepts temporary, part-time employment with the same or another State agency.

Primary Agency – The agency or department who has reporting and personnel support responsibility for the employee (i.e., the employee's primary employer)

Secondary Agency - The agency or department requesting and/or engaging the services of and compensating any employee for services which are clearly not a part of the employee's regular job.

### **POLICY**

1. Employees of the South Carolina Military Department in Full-Time Equivalent (FTE) positions may accept additional temporary, part-time employment (Dual Employment) within the Military Department or another State agency providing they have the approval of the South Carolina Military Department.
2. Employees of the South Carolina Military Department in non-Full-Time Equivalent (FTE) positions may accept additional temporary, part-time employment (Multiple Employment) within the Military Department or another State agency providing they have the approval of the South Carolina Military Department.
3. Employee may not begin the dual or multiple employments prior to both the Primary and Secondary Agency approving the Dual Employment Request or Multiple Employment Request.
4. The Chief of Staff for State Operations is designated as the Approval Authority for dual or multiple employment requests for employees of the Agency.
5. The dual or multiple employments are limited in duration to the specific time frame approved which cannot exceed twelve (12) months.
6. The Agency reserves the right to rescind or revoke the approval of a dual or multiple employment request at any time.
7. Agency employees engaged in dual or multiple employments will satisfy all established work hours assigned to their Agency position. The Agency will not, nor will its departments or programs, alter or revise an employee's work schedule to provide time to perform dual or multiple employment duties for a Secondary Agency.

8. Agency employees who are currently approved for dual or multiple employment and who accept a new position within the agency but in a different department or program must recertify their Dual Employment Request or Multiple Employment Request with their new department or program management.

9. Dual or Multiple Employment Outside The Agency. An Agency employee may use Annual Leave or Leave Without Pay (LWOP) to provide services during working hours for a non-Military Department Secondary Agency, and may receive compensation from the non-Military Department Secondary Agency for services performed during the period of leave.

10. Dual or Multiple Employment Within The Agency

a. The Agency will only approve dual or multiple employment within the Military Department when extraordinary circumstances exist based on the Agency's (not the employee's) business needs.

b. An Agency employee who performs services during other than normally scheduled hours of work for the Agency may be considered to be performing dual employment or multiple employment, and be paid additional compensation, if such services constitute independent, additional job duties from those of the employee's primary duties within the Agency.

c. No Agency employee will receive dual employment or multiple employment compensation from the Agency while in a leave with pay status to include designated State holidays, Annual Leave, and Compensatory Time.

11. The Agency will not use dual or multiple employment as the means to fill the part-time Armory Sitter positions.

## **PROCEDURE**

1. The SC Military Department's State Human Resources Officer (HRO) will review all dual employment or multiple employment requests (i.e., SCEIS Dual Employment Request Form or Multiple Employment Request Form). The State HRO will forward the request with a recommendation for approval/disapproval to the Chief of Staff for State Operations for decision.

2. The Secondary Agency is responsible for initiating and coordinating dual or multiple employment arrangements to include initiating the Dual Employment Request Form or Multiple Employment Request Form. The Secondary Agency will coordinate the approval and any modifications of the Dual Employment or Multiple Employment request with the Primary Agency.

3. Upon approval of the Dual Employment Request Form or Multiple Employment Request Form, the Primary agency will submit a service desk ticket to the Division of State Human Resources with a copy of the Dual Employment Request Form or Multiple Employment Request Form. The Division of State Human Resources will notify the Primary Agency of the completion of the request through the closure of the ticket.

4. Compensation for Dual or Multiple Employment

a. No employee will receive compensation for dual or multiple employment prior to the approval of the Dual Employment Request Form or Multiple Employment Request Form.

b. Both the Primary Agency and the Secondary Agency must comply with the provisions of the Fair Labor Standards Act (FLSA).

(1) The Primary Agency (through SCEIS) will combine and review the employee's work hours for both the Primary and Secondary Agency to determine if the employee is due overtime compensation.

(2) The Secondary Agency is responsible for paying the overtime compensation for any overtime resulting from the hours from the dual or multiple employment. The Primary Agency is responsible for any overtime compensation resulting from work hours related to the employee's primary job.

c. The employee will receive all compensation through their Primary Agency as a part of their regular check or direct deposit. The Secondary Agency will provide the employee's earned compensation through the Primary Agency

d. The Secondary Agency will determine compensation for the dual or multiple employment.

(1) The maximum compensation an employee is authorized to receive for dual and/or multiple employment in a Fiscal Year shall not exceed 30% of the employee's annualized salary with the Primary Agency for that Fiscal Year.

(2) The Primary Agency is responsible for ensuring the dual and/or multiple employment payments made to its employees within one Fiscal Year do not exceed the 30% limitation.

(3) The Division of State Human Resources (DSHR) is authorized to approve exceptions to the 30% limitation based on written justification submitted by the Secondary Agency.

e. The Secondary Agency must make payment to the employee (through the Primary Agency) of funds approved for and earned under dual or multiple employment within 45 days of the beginning of the employment.

f. Dual or multiple employment employees are not eligible for any additional fringe benefits as a result of dual and/or multiple employment, including but not limited to Annual Leave, Sick Leave, Military Leave, State insurance, and holidays.

g. Dual and multiple employment compensation are subject to such tax and retirement deductions as required.

#### 5. Dual and Multiple Employment Recordkeeping

a. The State HRO will maintain the records for each dual and multiple employment arrangement.

b. The records must contain a completed and approved (both Secondary and Primary Agency) SCEIS Dual Employment Request Form and/or Multiple Employment Request Form.

#### ATTACHMENT:

1. SCEIS Dual Employment Request Form
2. SCEIS Multiple Employment Request Form

# SCEIS Dual Employment Request Form

## Dual Employment (FTE to Temp)

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### REQUESTING (Secondary) AGENCY

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AGENCY NAME: \_\_\_\_\_ SECTION/DEPT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_ PERSONNEL NUMBER: \_\_\_\_\_

INTERNAL POSITION TITLE (Object Name): \_\_\_\_\_ SECONDARY AGENCY POSITION NUMBER: \_\_\_\_\_

DESCRIPTION OF SERVICES TO BE PERFORMED: \_\_\_\_\_

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#### DURATION OF SERVICES AND PROPOSED COMPENSATION

DATES(MONTH/DAY/YEAR):

TIMES:

**TO PROCESS SALARY/HOURLY RATE PAYMENTS:**

TOTAL GROSS SALARY: \_\_\_\_\_

FROM: \_\_\_\_\_ FROM: \_\_\_\_\_ AM or PM

TRAVEL AND SUBSISTENCE: \_\_\_\_\_

TO: \_\_\_\_\_ TO: \_\_\_\_\_ AM or PM

TOTAL COMPENSATION: \_\_\_\_\_

TOTAL HOURS: \_\_\_\_\_

HOURLY RATE : \_\_\_\_\_

RETIREMENT CODE: \_\_\_\_\_  
(SCRS/ORP or PORS)

**TO PROCESS LUMP SUM PAYMENTS:**

**(Temporary Grant or Time -Limited Employment)**

LUMP SUM AMOUNT: \_\_\_\_\_

BUSINESS AREA: \_\_\_\_\_

COST CENTER: \_\_\_\_\_

FUND : \_\_\_\_\_

FUNCTIONAL AREA: \_\_\_\_\_

INTERNAL ORDER: \_\_\_\_\_

GRANT: \_\_\_\_\_

WBS ELEMENT: \_\_\_\_\_

EMPLOYEE'S SIGNATURE

DATE

AUTHORIZED REQUESTING AGENCY SIGNATURE

DATE

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### EMPLOYING (Home) AGENCY

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AGENCY NAME: \_\_\_\_\_ SECTION/DEPT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

INTERNAL POSITION TITLE (Object Name): \_\_\_\_\_ FLSA: \_\_\_ CURRENT ANNUAL SALARY: \_\_\_\_\_

NORMALLY SCHEDULED HOURS OF WORK ARE FROM: \_\_\_\_\_ AM or PM TO: \_\_\_\_\_ AM or PM

IF NECESSARY, HAVE ARRANGEMENTS BEEN MADE FOR THE EMPLOYEE TO TAKE ANNUAL LEAVE OR LEAVE WITHOUT PAY TO RENDER THE SERVICES DESCRIBED? YES  NO

AUTHORIZED EMPLOYING AGENCY SIGNATURE

DATE

# SCEIS Multiple Employment Request Form

## Temp to Temp Employment

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### REQUESTING (Secondary) AGENCY

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AGENCY NAME: \_\_\_\_\_ SECTION/DEPT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_ PERSONNEL NUMBER: \_\_\_\_\_

INTERNAL POSITION TITLE (Object Name): \_\_\_\_\_ SECONDARY AGENCY POSITION NUMBER: \_\_\_\_\_

DESCRIPTION OF SERVICES TO BE PERFORMED: \_\_\_\_\_

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#### DURATION OF SERVICES AND PROPOSED COMPENSATION

DATES(MONTH/DAY/YEAR):

TIMES:

**TO PROCESS SALARY/HOURLY RATE PAYMENTS:**

TOTAL GROSS SALARY: \_\_\_\_\_

FROM: \_\_\_\_\_ FROM: \_\_\_\_\_ AM or PM

TRAVEL AND SUBSISTENCE: \_\_\_\_\_

TO: \_\_\_\_\_ TO: \_\_\_\_\_ AM or PM

TOTAL COMPENSATION: \_\_\_\_\_

TOTAL HOURS: \_\_\_\_\_

HOURLY RATE : \_\_\_\_\_

RETIREMENT CODE: \_\_\_\_\_  
(SCRS/ORP or PORS)

**TO PROCESS LUMP SUM PAYMENTS:**  
**(Temporary Grant or Time-Limited Employment)**

LUMP SUM AMOUNT: \_\_\_\_\_

BUSINESS AREA: \_\_\_\_\_

COST CENTER: \_\_\_\_\_

FUND : \_\_\_\_\_

FUNCTIONAL AREA: \_\_\_\_\_

INTERNAL ORDER: \_\_\_\_\_

GRANT: \_\_\_\_\_

WBS ELEMENT: \_\_\_\_\_

EMPLOYEE'S SIGNATURE

DATE

AUTHORIZED REQUESTING AGENCY SIGNATURE

DATE

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### EMPLOYING (Home) AGENCY

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AGENCY NAME: \_\_\_\_\_ SECTION/DEPT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

INTERNAL POSITION TITLE (Object Name): \_\_\_\_\_ FLSA: \_\_\_ CURRENT ANNUAL SALARY: \_\_\_\_\_

NORMALLY SCHEDULED HOURS OF WORK ARE FROM: \_\_\_\_\_ AM or PM TO: \_\_\_\_\_ AM or PM

IF NECESSARY, HAVE ARRANGEMENTS BEEN MADE FOR THE EMPLOYEE TO TAKE **LEAVE, IF ELIGIBLE**, OR LEAVE WITHOUT PAY TO RENDER THE SERVICES DESCRIBED? YES  NO

AUTHORIZED EMPLOYING AGENCY SIGNATURE

DATE