

NAVAL MEDICAL CENTER
MEDICAL STAFF SERVICES DEPARTMENT
PORTSMOUTH, VIRGINIA 23708-2197
953-7550 OFFICE
953-0090 FAX

MEMORANDUM

From: _____
Name (Last, First, MI – Legible, Type, Print or Stamp)

To: Head, Medical Staff Services Department

Subj: OFF-DUTY EMPLOYMENT ACKNOWLEDGMENT

Department	Phone Number
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Select One: Privileged Provider RN LPN Dental Hygienist

1. I am or am not (*select one*) presently active in off-duty employment. In the event that I do seek off-duty employment, I will not enter into employment until the Commanding Officer's written approval is obtained.

2. I am aware that commencing off-duty employment without the prior written approval of the Commanding Officer may result in punitive/administrative actions for violation of Article I-22 MANMED of 29 Oct 92, DoD 6025.13R, HA Policy 96-050, and NAVMEDCENPTSVA off-duty employment instruction which is located on the NMCP SharePoint site under "Moonlighting."

3. I understand that I cannot apply for off-duty employment until I have successfully completed my onboarding Focused Professional Practice Evaluation (FPPE) (for privileged providers) or my department orientation (for clinical support staff) as determined by my department head.

4. If I seek off-duty employment, I am to complete the Off-Duty Employment application by accessing the NMCP SharePoint site listing under "Moonlighting" and upload the required documents. I may not commence off-duty employment until the application is approved. I further understand that in order to maintain my approved off-duty employment status, I must: 1) complete my monthly validation of hours worked; 2) complete BUMED- mandated annual off-duty employment education via SWANK; and, 3) complete the NMCP-mandated annual audit of off-duty employment. Failure to comply with any of these requires will result in the Commanding Officer's revocation of my approval to moonlight.

5. All health care providers are required to complete this form. **This includes all privileged providers, RNs, LPNs, and Dental Hygienists. Contractor providers are exempt.**

6. The point of contact is Dora Salazar-James at (757)953-7550.

Signature	Date
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