### REQUEST FOR APPROVAL OF OUTSIDE ACTIVITY

#### Part I - EMPLOYEE INFORMATION

<table>
<thead>
<tr>
<th>1. EMPLOYEE’S NAME (Last, First, MI)</th>
<th>2. AGENCY/PROGRAM (Address)</th>
<th>3. TELEPHONE &amp; E-MAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Murillo, Amanda</td>
<td>321 A Street, NW Washington, DC 20005</td>
<td>Phone: 202-555-5556 E-Mail: <a href="mailto:amurillo@agency.gov">amurillo@agency.gov</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. TITLE OF POSITION</th>
<th>5. GRADE/STEP</th>
<th>6. SALARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research Meteorologist</td>
<td>GS-15</td>
<td>$145,758</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. FINANCIAL DISCLOSURE FILING STATUS</th>
<th>8. NAME OF IMMEDIATE SUPERVISOR</th>
<th>9. SUPERVISOR’S TELEPHONE,&amp; E-MAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Public (SF 278)</td>
<td>J. Rocnation</td>
<td>Phone: 202-555-5554 E-Mail: <a href="mailto:jzroc@agency.gov">jzroc@agency.gov</a></td>
</tr>
<tr>
<td>☑ Confidential (OGE 450 or other)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part II - OUTSIDE ACTIVITY INFORMATION

i. **Nature of Outside Activity**: Indicate the type of activity for which you request prior approval, and describe the specific duties or services to be performed:

   a. **Teaching, Speaking, Writing or Editing** *(Check box X)*
      *(See note in section b below)*
      *(Complete section c below)*

   b. **Board Service** *(Check box X)*

   c. **Professional or Consultative Activity** *(Complete section c below)*

   d. **Expert Witness**

   e. **Other (explain):**

   ![Box with description]

b. **Describe in detail specific duties or services to be performed:**

   I have been invited to serve as a Councilor for the American Meteorological Society. This position is equivalent to serving on the Board of Directors. I will attend all Council meetings as well as other meetings and Association events throughout my term. As a research scientist, I will also participate in symposia and peer review articles dealing with meteorological science.

*c For activities involving teaching, speaking, or writing, provide a syllabus, outline, summary, synopsis, draft, or similar description of the content and subject matter involved in the course, speech, or written product (including, if available, a copy of the text of any speech)*

**c. Professional or Consultative Activity**: Complete this section if you will provide personal services directly to multiple clients, customers, or others.

1. **Type of Activity/Business:**

   ![Box with description]

2. **Will you be self-employed/sole proprietor?**

   ![Box with options Yes and No]

3. **Identify any partners or others with whom you will provide services:**

   ![Box with description]

4. **Estimate the total number of clients, customers, or others, to whom you would provide services during the activity period:**

   ![Box with description]
ii. **Outside Employer**

a. Name and address of outside employer:

American Meteorological Society  
45 Beacon Street, Boston MA  02180

b. Nature of business:

Professional association

c. Contact person, phone number, and email:

B. Knowles, XXX.555.5555  
bknowles@ams.org

iii. **Compensation and Related Expenses**

a. Compensation

1. Will the activity be compensated?  
   □ Yes  
   ☒ No

2. Method or basis of compensation (Check all that apply):

   □ Fee  
   □ Honorarium  
   □ Retainer  
   ☒ Salary  
   □ Advance  
   □ Royalty  
   □ Stock  
   ☒ Stock Options

   ☐ Other (Describe): ____________________________________________

   ☐ Non-Travel Related Expenses (Describe):

   ______________________________________________________________

3. Compensation amount (Estimated):

   ______________________________________________________________

4. Is Payor the same source as the employer identified above?  

   □ Yes  
   □ No (Explain): ______________________________________________
b. **Travel and related expenses:** Indicate whether travel is involved, and if so, whether the related expenses will be at your own expense or provided by the outside employer either in-kind or through reimbursement.

1. **Will outside activity require travel?**
   - [X] Yes (Check one): [ ] At own expense [X] In-kind or reimbursed
   - [ ] No

2. **If employer is providing travel related benefits, please describe those benefits:**
   - The Society will pay for any travel and lodging expenses associated with attending its meetings and Association-related events

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c. **Time:** Provide details with respect to the duration of the activity.

1. **Duration of activity:** From: [01/01/XX] To: [12/31/XX]

2. **Estimated time devoted to the proposed activity**
   (e.g. hours/day; days/week; weeks/year):
   - Approximately 30 business days/year attending meetings and Association-related events

3. **Will work be performed entirely outside of your normal official duty hours?**
   - [ ] Yes [X] No

   If “no,” estimate number of hours/days of leave:
   - See above.