REQUEST FOR APPROVAL OF OUTSIDE ACTIVITY

Part I - EMPLOYEE INFORMATION

1. EMPLOYEE'S NAME (Last, First, MI)					
Fenty, Robyn R.					
2. AGENCY/PROGRAM (Address)	3. TELEPHONE & E-MAIL				
321 A Street, NW Washington, DC 20005	Phone: 202-555-5556 E-Mail: rfenty@agency.gov				
4. TITLE OF POSITION	5. GRADE/STEP	6. SALARY			
Deputy Director of Public Affairs	GS-15	\$ 123,758			
7. FINANCIAL DISCLOSURE FILING STATUS	Public (SF 278)	Confidential (OGE 450 or other)			
8. NAME OF IMMEDIATE SUPERVISOR	9. SUPERVISOR'S TELEPHONE,& E-MAIL				
J.Z. Rocnation	Phone: 202-555-5554 E-Mail: jzroc@agency.gov				

Part II - OUTSIDE ACTIVITY INFORMATION

a.

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

X Teaching, Speaking, Writing or Editing* (See note in section b below)	Board Service
Professional or Consultative Activity (Complete section c below)	Expert Witness
X Other (explain):	

I have been asked by the American Society of Public Affairs Officers to serve as its Vice President beginning January 1, 2012.

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

I have been invited to give a panel presentation at the American Society of Public Affairs Officers' annual conference, October 18-20, 2011. I've been asked to speak on the pros and cons of using social media as a tool in public affairs.

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

No

Yes

- 3. Identify any partners or others with whom you will provide services:
- 4. Estimate the total number of clients, customers, or others, to whom you would provide services during the activity period:

ii. **Outside Employer**

a. Name and address of outside employer:

American Society of Public Affairs Officers 700, 9th Street, NW. Washington DC

b. Nature of business:

Professional association

c. Contact person, phone number, and email:

B. Knowles, 202.555.5555 bknowles@aspao.org

iii. **Compensation and Related Expenses**

a. Compensation

1.	Will the activity be compensated?		Yes	X	No
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2. Method or basis of compensation (Check all that apply):

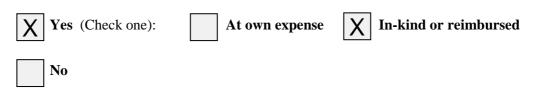
Fee	Honorarium	Retainer	Salary				
Advance	Royalty	Stock	Stock Options				
Other (I	Describe):						
Non-Travel Related Expenses (Describe):							
Compensation	amount (Estimated):						
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4. Is Payor the same source as the employer identified above?

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?



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 annual conference. It will also pay for similar expenses to attend quarterly Chapter events in various locations across the US.

- c. Time: Provide details with respect to the duration of the activity.
 - 1. Duration of activity:
 From:
 01/01/12
 To:
 12/31/13
 - 2. Estimated time devoted to the proposed activity (e.g. hours/day; days/week; weeks/year):

Regarding the Vice Presidency, approximately 17 days attending annual conference and chapter meetings. All other work will be performed outside of government duty hours. The annual conference is slated for October 18-20, 2011

3. Will work be performed entirely outside of your normal tour of duty?

No

If "no," estimate number of hours/days absent:

