Section 7(p)(2) of the FLSA provides that where State or local government employees, solely at their option, work occasionally or sporadically on a part-time basis for the same public agency in a different capacity from their regular employment, the hours worked in the different jobs shall not be combined for the purpose of determining overtime liability under the Act.

Typically, public recreation and park facilities, and stadiums or auditoriums utilize employees in occasional or sporadic work. Some of these employment activities are the taking of tickets, providing security for special events (e.g., concerts, sporting events, and lectures), officiating at youth or other recreation and sports events, or engaging in food or beverage sales at special events, such as a county fair. Employment in such activity may be considered occasional or sporadic for regular employees of State or local government agencies even where the need can be anticipated because it recurs seasonally.

SECTION I: Completed by Hiring Department

Employee Name: ________________________________________________________________

Employee’s Primary Position Title: ________________________________________________

Description of Additional Assignment: _____________________________________________

The duties of this occasional/sporadic assignment do not fall within the same general occupational category of the employee’s primary assignment. (If you are unsure in determining if an employee’s primary assignment falls within the same general occupational category, you may contact Human Resources for assistance.)

☐ Yes, the work performed in this assignment is in a different capacity from the employee’s regular employment.

Department Head Signature ___________________________ Date _______________________

SECTION II: Completed by Employee

My decision to work on an occasional or sporadic part-time basis for this department was made freely and without coercion, implicit or explicit, by the employer.

I have read the information above and understand that the hours worked in this assignment will not be combined with my other assignment(s) for the purpose of determining overtime liability under FLSA.

Employee Signature ___________________________ Date _______________________
