

# PROFESSIONAL SERVICE CONTRACT VBP WAIVER REQUEST

## REQUEST (to be completed by the requesting state contractor or potential state contractor)

For a period of two years beginning August 16, 2008, a former state employees who received severance pay and benefits through the State of Tennessee Voluntary Buyout Program (VBP) may not work in any capacity with a VBP participating executive branch agency without written approval. Inasmuch, unless specifically waived in writing by the Commissioner of Finance and Administration and the Commissioner of Human Resources,

- neither a former state employee that participated in the Voluntary Buyout Program nor the spouse of such an individual may hold a controlling financial interest in a Contractor providing professional service to the state; and
- no former state employee who participated in the Voluntary Buyout Program may provide service in the performance of a professional service Contract (or grant contract) with the state.

**This request seeks a waiver (as detailed herein) regarding a former state employee to which the VBP prohibitions above are applicable.**

1. Number Assigned (by the state) to Relevant Agreement:

2. Name of Contractor Under Relevant Agreement:

3. Name of the Procuring State Agency for the Above-Referenced Agreement:

4. Name of All State Agency Provided Service Under the Above-Referenced Agreement:

5. Name of Subject Former State Employee:

6. What were the state position and responsibilities of the above-named former state employee immediately prior to that individual's acceptance of the VBP severance package?

7. If approved, would the above-named former state employee or spouse of such individual hold a controlling financial interest in a above-referenced contractor providing professional service to the state?

YES  NO

8. If approved, would the above-named former state employee provide service in the performance of the above-referenced agreement?

YES  NO

9. If the above-named former state employee WOULD provide service in the performance of the above-referenced agreement, what services would she/he provide?

10. Requesting Contractor Signature and Date:

**REQUEST APPROVAL DETERMINATION (to be completed by the state)**

**Procuring Agency Head Determination, Signature & Date:**

- Waiver Approved** (as described above)
- Waiver Approved** (as described above and subject to limitations detailed in the attached memorandum)
- Waiver Denied** (reasons therefore attached)

**Commissioner of Finance & Administration Determination, Signature & Date:**

- Waiver Approved** (as described above)
- Waiver Approved** (as described above and subject to limitations detailed in the attached memorandum)
- Waiver Denied** (reasons therefore attached)

**Commissioner of Human Resources Determination, Signature & Date:**

- Waiver Approved** (as described above)
- Waiver Approved** (as described above and subject to limitations detailed in the attached memorandum)
- Waiver Denied** (reasons therefore attached)

**NOTICE: A denial by any one of the three state officials above shall denote that the waiver request is denied.**