

For Faculty Covered by Collective Bargaining Agreement  
If room for entries is not sufficient please add attachments as necessary

## **DISCLOSURE OF OUTSIDE ACTIVITIES AND FINANCIAL INTERESTS FORM**

University of Florida

Instructions for Completing the Disclosure of Outside Activities and Financial Interests Form

### **General Remarks**

University of Florida faculty and staff members may engage in outside activities that provide and hold financial interests subject to the requirements of collective bargaining agreements, University regulations, state law, and federal regulations and law, if applicable. Whenever a question, or appearance of conflict, could arise between the employee's obligation to the University and any activity or financial interest, the employee is expected to report the situation to the supervisor for discussion and, if required as set forth below, to provide a report disclosing the information prior to engaging in the activity or obtaining the financial interest. University officials are responsible for reviewing each disclosure to determine if the activity or interest, is permitted, not permitted, or if there are conditions necessary to manage, reduce or eliminate the conflicts or potential conflicts before the activity or interest can be permitted.

In addition to completing the statement regarding activities and financial interests annually through effort reporting or the receipt of an evaluation, an annual disclosure should be submitted at the beginning of each academic year or other annual appointment for each existing outside activity or financial interest. A new disclosure should be submitted at such time as there is a significant change in an activity or financial interest (nature, extent, funding, etc.) or before a new outside activity or financial interest is undertaken. These reporting provisions shall apply to activities performed or interests held while an employee is in pay status, or is on a compensated leave, including a professional development leave, but shall not apply to activities performed wholly during a period in which the employee has no appointment with the University. The employee should still be aware of and deal with the conflict of interest considerations that may arise from the latter activities.

An employee's failure to report activities or financial interests under this collective bargaining agreement or to follow any conditions imposed pursuant to the University's approval of such activities or interests may be grounds for disciplinary action. Such actions may include, but are not limited to: reprimand, fine, reduction in salary, change of assignment, prohibition of outside activities, suspension without pay, and termination for cause.

### **Reporting Requirements**

The following activities and financial interests must be reported and approved prior to engaging in the activity:

a. Outside activities in which there is more than an incidental use of university facilities, equipment, and/or services. The completed Disclosure of Outside Activities and Financial Interests form is required to be attached to the Request to use these facilities, equipment or services.

For Faculty Covered by Collective Bargaining Agreement

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b. Outside activities in which a university student or university employee is directly or indirectly supervised by the employee if the employee in any way supervises or evaluates the student or the employee at the University.

c. Management, employment, consulting, and contractual activities with, or ownership interests in, a business entity which does business or is proposing to do business with the University. In the cases of material financial and of managerial interests, the information required extends to the spouse and children of the employee, and for managerial interests, to relatives.

d. Management, employment, consulting, and other contractual activities with, or ownership interest in, a business entity which competes with the University.

e. Candidacy, election or appointment to a public office.

f. Required use of books, supplies, equipment, or other instructional resources at the University when they are created or published by the employee or by an entity in which the employee has a financial interest.

g. Professional compensated activities including but not limited to activities for which travel expenses, travel support, and/or honoraria are paid, teaching at another institution, or employment as an expert witness.

h. Business activities, including service on the board of directors or other management interests or position, with regard to a business entity in the same discipline or field in which the faculty or staff member is employed.

i. Any employment, contractual relationship, or financial interests of the employee that may create a continuing or recurring conflict between the employee's interests and the performance of the employee's public responsibilities and obligations, including time commitments. This includes any outside activity in which the employee is required to waive rights to intellectual property.

j. Outside activities and financial interests required to be reported under certain federal contract and grant regulations. Such disclosures may also need to be made at the time of the submission of the proposal.

k. Outside activities (employment, consulting, management and other contractual activities) and financial interests in an entity that supports the employee's research or training activities in any way.

l. Outside activities (employment, consulting, management and other contractual activities) and financial interests in an entity that licenses technology invented by the employee.

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| m. Any other employment outside the University.

n. Any other outside activity or financial interest which may create a conflict of interest.

#### Affirmation

The signature on the completed disclosure form affirms and certifies an understanding of and compliance with the University's policies on conflict of interest, outside activities and financial interests as well as the completeness and accuracy of the responses. Information on the University's guidelines and procedures may be obtained from your academic or administrative units and are located on the web at

<http://www.generalcounsel.ufl.edu/downloads/COI.pdf>.

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University of Florida  
Disclosure of Outside Activities and Financial Interests  
Disclosure Period: July 1, to June 30.

Name \_\_\_\_\_

Title/Rank \_\_\_\_\_

Phone number \_\_\_\_\_

Email \_\_\_\_\_

% FTE \_\_\_\_\_

UFID \_\_\_\_\_

Department or Unit \_\_\_\_\_

College or Division \_\_\_\_\_

University Contract Period

9 month

12 month

1. In accordance with University of Florida rules, I report the following activity or interest. Please check the category or categories of the activity or financial interest as described in the Instructions to this form:

1. a. b. c. d. e. f. g. h. i. j. k. l. m.

2. Please provide the requested information on the activity or financial interest performed/proposed during the University contract period as identified above. Please use additional pages if necessary. ***All activities and financial interests for one entity should be disclosed on one form. Additional activities and financial interests should each be reported on separate forms.***

(a) Name of entity (or person) with which the activity is to be conducted, or name of entity in which the financial interest is held, and nature of its business:

Is the entity a for-profit entity or a not-for-profit entity

Does the entity or parent, subsidiary or affiliated organization of the entity sponsor your research at UF or license technology from UF you invented? Yes No

(b) Description of activity or financial interest. Please check all that apply.

Consultant

Director

Officer

Employee

Honorarium

Royalty Recipient

Ownership Interest

Percentage of ownership

Value of ownership

Type of ownership interest:

Stock (not publicly traded) ownership

Stock (publicly traded) ownership

LLC ownership

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Partner

Sole Proprietor

Other Describe: \_\_\_\_\_

\_\_\_\_\_  
Stock Option or other Option Agreement

Other Describe: \_\_\_\_\_

\_\_\_\_\_  
(c) Source of and type of compensation (e.g.: company/organization/client and cash/expense reimbursement; in the case of legal representation or service as an expert witness, all parties to the matter must also be identified):

Source of compensation: \_\_\_\_\_

\_\_\_\_\_  
Type of compensation: \_\_\_\_\_

\_\_\_\_\_  
(d) Location and anticipated dates of activity :

\_\_\_\_\_  
(e) Is this a one time or continuing activity? One time Continuing

If one time, estimated number of total hours, including travel time \_\_\_\_\_ hours

If continuing activity, estimated number of hours per week spent on the reported activity, including travel time: \_\_\_\_\_

If you earn vacation leave, indicate number of hours per week that will be taken: \_\_\_\_\_

\_\_\_\_\_  
If none, explain why no vacation is to be taken: \_\_\_\_\_

\_\_\_\_\_  
(f) Will University of Florida employees and/or students be involved in connection with the outside activity?

No Yes (If yes, explain): \_\_\_\_\_

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(g) Will University equipment, facilities or services be used in connection with the outside activity?    No    Yes (If yes, please attach a completed Request to Use University Equipment, Facilities and Services in connection with Non-University Activity form.)

(h) Are you required, as a condition of the employment/activity, to waive any rights you or the University of Florida might have to intellectual property you develop, including copyrights or patent rights?    No    Yes (If yes, the Office of Research must review and act on the employment/activity.)

(i) Has this activity been approved before?    No    Yes

(j) Total number of outside activity and financial interest reports submitted during this contractual period including this report: \_\_\_\_\_

\_\_\_\_\_  
Estimated total number of hours spent per week during this contractual period on all outside activities including this activity: \_\_\_\_\_

\_\_\_\_\_  
3. I understand that the activity and/or interests identified in the Instructions to this form must be reviewed and acted upon by the appropriate university officials as set forth below. For each activity or financial interest disclosed, other information may also be requested in order to completely review the activity or interest if there are potential conflicts involved.

4. I understand that if I (or my spouse, domestic partner, child or other relative) have a material financial interest or a managerial interest in an entity, or an employment or other contractual relationship with an entity, that proposes to do business with or does business with the University, I will submit a copy of this form to the University's Purchasing Services (with the purchase requisition if a purchase requisition is required) or the contracting authority at the university prior to the purchase being made or the University's entering into contract with the entity. I understand that if I am involved in the procurement or contractual process for the entity or for the University (including but not limited to making recommendations) I must inform the University office making the procurement or entering into the contract of my financial interest prior to the procurement or the signing of the contract in order that determination may be made whether the procurement and/or contract is allowable under Florida law and University regulations.

5. I have read Appendix G of the collective bargaining agreement, and I understand my obligations.

6. I hereby certify that the information reported here is accurate and complete. Further, I understand that my engaging in a non-university activity must not create a conflict of interest,

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unless such conflict is allowable under the law and this collective bargaining agreement or interfere with the full and faithful performance of my University professional responsibilities or other University obligations.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

| REVIEWER                                                                                  | REVIEWER'S SIGNATURE | APPROVED | DISAPPROVED | DATE |
|-------------------------------------------------------------------------------------------|----------------------|----------|-------------|------|
| Chair or Supervisor<br>(Printed Name)                                                     |                      |          |             |      |
| Dean, Director or other<br>Appropriate<br>Administrator<br>(Printed Name)                 |                      |          |             |      |
| Office of Research (if<br>applicable)<br>(Printed Name)                                   |                      |          |             |      |
| Purchasing Services or other<br>Contracting Authority(if<br>applicable)<br>(Printed Name) |                      |          |             |      |

7. Was conference held to discuss this disclosure? No Yes If yes, please write a brief summary of action taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

8. The form should be returned to the employee and others noted below whether the activity is authorized as presented, authorized with conditions or not authorized. The returned copy should include all appropriate signatures. A copy of the form must be sent to the Purchasing Services or other applicable Contracting Authority if the disclosure is made under c (and as further described under item 4 above).

Copies of completed forms must be sent to: (1) Office of Human Resources, (2) dean or director, (3) department chairperson or other appropriate administrator, (4) employee, and (5) Office of Research if applicable; (6) Division of Purchasing or other contracting unit (if applicable).