**Appendix D: Disclosure and Management of**

 **Potential Conflicts of Interest and/or Commitment**

Activities in the service of the University’s land-grant mission and work that complements and builds upon faculty and staff expertise is encouraged by the University. However, under Fayetteville Policies and Procedures 404.0, it is the campus policy of the University of Arkansas (UA) that its officers, faculty, staff and others acting on UA’s behalf have the obligation to avoid ethical, legal, financial and other conflicts of interest and conflicts of commitment with their obligation to the University or its welfare. To help ensure compliance with the policy, **all faculty and staff** must complete the following statement of disclosure of any relationships or activities which might give rise to conflicts, or the appearance thereof, with their duties, responsibilities, or obligations to the University. This is also intended to assist UA in complying with disclosure requirements associated with federal funding and with federal export control requirements.

Situations requiring disclosure include, but are not limited to:

- any outside employment, including consulting, compensated speaking engagements or creative activities, or service as officer, manager, director, or shareholder/owner

- participation in any foreign talent recruitment program

- use of own instructor-prepared textbooks in courses

- appointments with other institutions (including teaching or research)

- research funded by a foreign entity

- paid or unpaid service to a foreign entity

- scientific collaborations with foreign persons/entities in connection with U.S. federally funded research

- significant financial interests

**All faculty and staff (both classified and non-classified) are required to complete this form i) within two weeks of hire; ii) annually; and iii) within 30 days whenever a new or potential conflict is identified. Do not wait until the next annual reporting period to disclose any newly identified conflicts.**

[ ] I have read the campus policy on conflict of interest and commitment, and I disclose the attached explanation of the

 nature of each potential conflict of interest/commitment or appearance thereof.

[ ]  I have read the campus policy on conflict of interest and commitment, and I have no conflicts to disclose.

Note: The information provided to the University may be subject to public disclosure. To request that specific information be reviewed to determine if it is eligible for exemption, attach all information required by Section 11.3 of the campus conflict of interest policy (Fayetteville Policies and Procedures 404.0). **In signing this form, the employee** **acknowledges that all information not determined to be exempt may be released by UA upon public request, without further notice**.

Name: Click or tap here to enter text.

Title or Position: Click or tap here to enter text.

Workday ID#: Click or tap here to enter text. Note: this is not the number that appears on your UARK ID Card.

Department/Unit: Click or tap here to enter text.

**Please answer ALL questions below. Note that there may be conflicts of interest and/or commitment not covered by questions 1 – 10. In that case, you should answer YES to question 11 and provide a detailed explanation in the space that follows.**

Are you engaged in any outside employment? All full-time (30 hours or more) 9-month and 12-month faculty and all non-classified staff must request prior approval to work outside the university. For faculty engaging in recurring employment that aligns with their university appointment, approval may be requested at the beginning of the academic year. Recurring employment must be approved annually. This requirement includes outside employment for all covered employees during university breaks and holidays. **Summer employment for 9-month faculty members must be disclosed in advance using this form if the employment:** 1) involves research, teaching, or creative activity, or an appointment with another institution; 2) pertains to university research as defined under [Board of Trustees Policy 210.1](https://www.uasys.edu/board-policy/210-1/); 3) otherwise relates to your expertise or responsibilities as a university employee; or 4) involves compensation or support from a foreign entity, or furnishing of research or services to a foreign entity. **Provost approval is required for all full-time faculty engaging in teaching, conducting research, or accepting any other appointment at another institution. Provost approval of the conflict management plan is required when certain personal relationships that may involve conflicts of interest involving faculty members exist.**

1. Are you planning to conduct research, engage in creative activity, teach a course, provide compensated services, or accept any other appointment at another institution, whether foreign or domestic? Note that all full-time faculty must have prior approval by the Provost for teaching or any other appointment at another institution, other than a courtesy adjunct appointment to serve on a dissertation committee. For summer appointments for 9-month faculty, see above.

[ ]  Yes [ ]  No

1. Do you have a personal relationship with another employee or a student within your administrative unit or program covered by 404.0.VII K or L?

[ ]  Yes [ ]  No

**Note: for faculty, situations involving 1 or 2 require Provost review and approval.**

**Additional Questions**

1. Do you serve as an officer, manager, or director in a company or other entity, or have a fiduciary role with such an entity? Note that a conflict management plan may be required.

☐ Yes ☐ No

1. Are you planning to give an invited talk or lecture for which you will receive an honorarium or other form of compensation, not including reimbursement of direct travel costs?

☐ Yes ☐ No

1. Are you being reimbursed for external travel in excess of $5000 in aggregate from a single, nonexempt sponsor in a calendar year (January 1 – December 31)? See Appendix F – Disclosure of Externally Reimbursed Travel

☐ Yes ☐ No

1. Do you have any ownership or financial interest in an entity that seeks to do business with the university or any affiliated or supporting entity, including university-related foundations and the Alumni Association?

☐ Yes ☐ No

1. Do you receive direct or indirect financial benefit from the sale of course materials (textbooks, software, etc.) or other goods or services to students who you teach or evaluate? *Note: if you check yes, you must describe the disposition of payments, revenue, or royalties from the sale of these materials. These must be paid to a unit not directly related to or associated with the faculty member.* See [Academic Policy Series 1550.30](https://provost.uark.edu/policies/155030.php).

☐ Yes ☐ No

1. Do you have any other significant financial interests that reasonably appear to be related to your university responsibilities, as defined in 404.0, *Disclosure and Management of Potential Conflicts of Interest and/or Commitment?*

*For researchers conducting Public Health Service-funded research, the approximate value of significant financial interests must be furnished (dollar ranges are permissible: $0–$4,999; $5,000–$9,999; $10,000–$19,999; amounts between $20,000–$100,000 by increments of $20,000; amounts above $100,000 by increments of $50,000), or a statement that the interest is one whose value cannot be readily determined through reference to public prices or other reasonable measures of fair market value. For others, valuation information may be requested as necessary to assess matters related to any potential conflict of interest or commitment or University compliance obligations.* Note that a conflict management plan may be required.

☐ Yes ☐ No

 a. If Yes, and if you are a Principal Investigator or co-Principal Investigator, have you disclosed such conflicts to federal sponsors?

 ☐ Yes ☐ No

1. Do you or any entity that you are affiliated with receive any research funding or financial/in-kind support from any foreign entity, or furnish research or services to such an entity?

☐ Yes ☐ No

 a. If Yes, and if you are a Principal Investigator or co-Principal Investigator, have you disclosed such conflicts to federal sponsors?

 ☐ Yes ☐ No

1. Are you engaging in any scientific collaborations with foreign persons or entities in connection with federally-funded research?

☐ Yes ☐ No

1. Do you participate in any foreign talent recruitment programs?

☐ Yes ☐ No

1. Do you have any other circumstances that present an actual or potential conflict of interest or commitment or the appearance thereof (*e.g.* contractual/financial relationships; organizational obligations; consulting arrangements; supervising or contracting with family members; *etc.*)?

☐ Yes ☐ No

If you answered yes to any of the above questions, please provide as much detail as possible in the space below, including steps taken to mitigate any conflict(s).

Click or tap here to enter text.

**In signing this form, I certify that all information is true, accurate, and complete.**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Administrative Review** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Department Chair or Unit Head*

[ ]  No conflict exists [ ]  Conflict exists, acceptable management [ ]  Unallowable conflict

 plan in place or proposed

[ ]  Further review or conditions required (specify): Choose a building block.

Name of Department Chair or Unit Head: Choose a building block.

Signature: Choose a building block. Date: Choose a building block.

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*Dean or Unit Head Supervisor*

[ ]  No conflict exists [ ]  Conflict exists, acceptable management [ ]  Unallowable conflict

 plan in place or proposed

o Further review or conditions required (specify): Choose a building block.

Name of Dean or Unit Head Supervisor: Choose a building block.

Signature: Choose a building block. Date: Choose a building block.

[ ]  Possible Intellectual Property Issue – Request VCED Review

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*Vice Chancellor for Economic Development, if referred due to intellectual property concerns:*

[ ]  No conflict exists [ ]  Conflict exists, acceptable management [ ]  Unallowable conflict in place or proposed

[ ]  Further review or conditions required (specify): Choose a building block.

Name of Vice Chancellor for Economic Development (or designee): Choose a building block.

Signature: Choose a building block. Date: Choose a building block.

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*Vice Chancellor for Research and Innovation*

[ ]  No conflict exists [ ]  Conflict exists, acceptable management [ ]  Unallowable conflict in place or proposed

[ ]  Further review or conditions required (specify):

Name of Vice Chancellor for Research and Innovation (or designee): Choose a building block.

Signature: Choose a building block. Date: Choose a building block.

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***Provost* (Required for all full-time faculty teaching, conducting research/creative activity, or otherwise appointed at another institution, or for faculty personal relationship covered by 404.0.VII K or L).**

 [ ]  No conflict exists [ ]  Conflict exists, acceptable management [ ]  Unallowable conflict

 plan in place or proposed

[ ]  Further review or conditions required (specify): Choose a building block.

Name of Provost (or designee): Choose a building block.

Signature: Choose a building block. Date: Choose a building block.

* **Disclosure and management plan, as applicable, may be reviewed by the Conflict of Interest and Commitment Review Committee (CICRC)**
* **Upon final signature, a copy of this disclosure will be provided to the employee, Chair or Unit Head, Dean or Unit Head Supervisor, and Research Compliance. As appropriate copies will also be provided to VCED and the Provost.**
* **Record maintained in the Office of Research Compliance**