

Notification of Outside Activity/Consulting

SUNY Morrisville employees may use this form as notification of engagement in professional and outside activities and consulting. This notification should be completed before engaging in any outside activity/consulting and returned to the ethics officer who is currently Amy McLaughlin, Vice President of Human Resources, mclaugai@morrisville.edu

Name: _____

Title: _____

Department: _____

Email address: _____

Classification: Faculty Staff Researcher Student

Employment Status: *Full-Time* *Part-Time*

Appointment Basis: Calendar Year Academic Year Summer

Funding: What percentage of your position is currently funded from sponsored research? _____%

External Entity Name & Address:

1) Is this entity engaged in current or prospective sponsored projects with Morrisville?
 Yes No

a) If yes, are you an investigator for any of these projects? Yes No

2) Do you or a family member have an ownership interest in this entity?
 Yes No

3) To your knowledge, does any other Morrisville employee have an ownership interest in this entity?
 Yes No

a) If yes, provide employee's name: _____

Beginning Date of Activity: _____

End Date of Activity: _____

Total Number of Days devoted to this activity per week:

Total Number of Hours devoted to this activity per week:

Will this activity affect your ability to meet your instruction or other responsibilities for Morrisville? Yes No

If yes, please explain:

Describe in detail the activity and/or nature of relationship with the external entity:

Indicate the actual or anticipated value of income and/or ownership interest in the external entity aggregated for you and members of your immediate family for the current fiscal year (July 1 - June 30):

Did you earn any income from this entity in the past year? Yes No

If yes, how much? _____

1. Do you intend to perform duties for the external entity at Morrisville? Yes No

2. Do you intend to use Morrisville equipment or facilities to perform any of the duties for the external entity? Yes No

3. Do you or any members of your family hold a position of management in the external entity? Yes No

4. Will other faculty members, staff, students or other personnel associated with Morrisville be involved in this external entity? Yes No

I understand that consulting/external employment may not be undertaken on any portion of time covered by federal grants or contracts.

I further certify that there will be no conflict of interest between this outside employment and my responsibilities as an employee of the State University of New York at Morrisville.

The proposed employment will not interfere with my assigned duties. I feel that my value as a University employee and my own professional status will be enhanced and improved by the proposed outside professional activity. I also certify that this employment/ consulting work will be conducted at no expense to the SUNY system. In such outside employment, I shall act as an individual and not as a representative of the SUNY system.

Employee Signature: _____

Date: _____

Supervisor/Chair Signature: _____

Date: _____