

CONFIDENTIAL DISCLOSURE - NOT FOR DISTRIBUTION

CONFLICT OF INTEREST AND/OR COMMITMENT DISCLOSURE STATEMENT

Academic Staff Member:

This is a request for written approval to engage in non-University income-generating activities. I acknowledge that I must also disclose these activities: 1) annually, 2) whenever substantial changes in such activities occur, or 3) when required by granting agencies. I understand that state and federal agencies have legitimate concerns that any research they sponsor is free of bias due to financial interests of the investigator and institution, that funds provided be expended as intended, and that the commitment of time and effort be appropriate for the project supported.

I understand that a conflict of commitment arises when my external activities are so demanding of my time or attention that they interfere with my individual responsibilities to Old Dominion University; and that I am to arrange my outside obligations, financial interests, and activities so they do not impede or conflict with my University duties or responsibilities.

I understand that a conflict of interest occurs when I am in a position of influence either directly or indirectly related to University business, research, or other decisions in a way that could lead me to advance my own interests or that of my family or others to the University's detriment (e.g., to the detriment of the University's integrity and its missions of teaching, research, and public service). I understand that when consulting privately with external entities, I am acting in my individual capacity and must make it understood that I am not acting on behalf of the University.

Herein, I agree to identify, disclose and evaluate potential conflicts and to manage or eliminate them.

Students

I understand that my involvement of Old Dominion University students or employees in my external activities must be disclosed, reviewed, approved and may require monitoring. This ensures that exploitation or unreasonable interference with University duties and responsibilities, including course, thesis and dissertation work does not occur. I will make students and staff involved in my outside professional activities fully aware of the University's policies and precautions regarding these activities.

Research Integrity

I understand that the role of the University is to create and disseminate knowledge, so I must avoid external commitments that would encumber my choice of subject matter and/or research strategies.

Publications

I understand that a delay in disseminating information, such as through publication of research results or participation in seminars, for inappropriate periods of time must be avoided.

Intellectual Property

I understand that in order to protect the University's intellectual property rights and to comply with federal guidelines and the University commitment to technology transfer, I must make University obligations known to external entities with whom business is contracted and provide them with a statement of relevant University policies governing inventions and discoveries. Old Dominion University intellectual property may not be assigned to other entities without prior approval through established University procedures.

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Description of External Activities
Company and/or Government Agency to which I am or will be providing services:
Job title I hold or will hold:
Contract numbers (ODURF Number and Government Contact Number):
Describe anticipated duration of contract or involvement (beginning and end dates):
Amount of personal remuneration to me. Describe pay, contract amount, stock:
Nature of Research Activities (Attach additional pages if necessary)
Describe the Scope of Work:
Describe the use of Old Dominion University facilities and resources. If there is or will be a use, please describe how this use will enhance University-related professional skills:

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Provide the names of Old Dominion University students or employees:
Intellectual Property
Describe the Intellectual Property which is anticipated to be developed or used:
Academic Staff Member Signature:
Printed Name:
Date:
Management of External Activities (Check recommendations and attach a report):
<input type="checkbox"/> Applicant should modify his/her research plans. <input type="checkbox"/> Appoint an oversight panel or person to monitor the research. <input type="checkbox"/> Appoint an impartial person to monitor the use of students. <input type="checkbox"/> Applicant should abstain from the promotional decisions of staff. <input type="checkbox"/> Applicant should be relieved of purchasing decision authority. <input type="checkbox"/> Applicant should divest his/her financial interests. <input type="checkbox"/> Applicant should apply for a leave of absence with pay. <input type="checkbox"/> Applicant should apply for a leave of absence without pay. <input type="checkbox"/> Conflict Disclosure Approved.
Dean Signature of Approval:
Printed Name:
Date:
Vice President of Research Signature of Approval:
Printed Name:
Date: