PRIOR APPROVAL FORM FOR OUTSIDE ACTIVITIES (CATEGORY I)

Name	I	Department	
Please print			
For each Category I compensated or activities answer the following ques		onal activity in which you wish to engage in out eparate sheets, if necessary.	side professional
Type of activity in which you will b <u>Category I Activities</u> Executive/managerial role: Outside teaching or research		Salaried employee: Other potential conflict of com	nmitment:
General description of the business/	agency/organiz	ation/group/individual:	
Activities/products/services of entity	y described abo)ve:	
Nature of your relationship to entity	named above (
Founder/co-founder: Board member: Equity/royalty interest:	Salaried er	Consultant: mployee: Stockholder/partnersh ase explain:	•
areas of research, industry, and puble Beginning/ending month/year you c		ed in this activity:	
		(Approvals are generally five years. Outside income reports must be su	
Estimated number of days= involve	ment during fis	cal-year appointment:	
Do you wish to take a full- or part-t	ime leave while	e engaged in this activity?	
		Approval granted through fiscal ending June 30,	year
		Request denied:	
		Department Chair	Date
		Dean	Date
Faculty Member Signature	Date	Chancellor or Chancellor's Designee	Date