



**MEMORANDUM**

**TO:** Staff Employees

**FROM:** Sherell Hendrickson, Associate Vice President  
Human Resources

**SUBJECT:** Report of Outside Activity

Pursuant to university policy, all employees must report outside activity that is compensated or uncompensated that may be perceived as a conflict of interest with their university duties and responsibilities. Such activities should be reported on a fiscal year basis, **July 1 through June 30**.

Conflict of interest is defined as any conflict between the private interests of the employee and the interests of the university, the UWF Board of Trustees, or applicable State of Florida laws. Employees are responsible for resolving such conflicts of interest by working in conjunction with their supervisors.

Prior to engaging in any outside activity that may create a conflict of interest; employees must report the anticipated activity on a Report of Outside Activity form. This form is available under the Human Resources internal web page under [Forms](#). The policy, [HR-15.00-2004/2007](#), may also be found on our web page under HR Information; Rules, Policies and Procedures, and Academic Affairs' policy and procedure for conflict of interest and report of outside activity may be found at <http://uwf.edu/academic/policies/conflict/conflict.cfm>.

Should you need any additional information or clarification on this issue, please contact me or Sharon Jones at [sjones@uwf.edu](mailto:sjones@uwf.edu) or 474-2611.

**THE UNIVERSITY OF WEST FLORIDA  
REPORT OF OUTSIDE ACTIVITY**

**The following outside activities must be reported prior to engaging in the outside activity:**

- a) All compensated outside activity which occurs during a period in which an employee is under contract with The University of West Florida, regardless of the duration of the outside activity or the level of compensation, that may create CONFLICT OF INTEREST.
- b) All uncompensated outside activity which you believe may create a CONFLICT OF INTEREST.

**TO BE FILLED OUT BY THE EMPLOYEE**

I, \_\_\_\_\_, Dept. \_\_\_\_\_ plan to engage in the outside activities noted below. (Describe nature and extent of activity.)

OUTSIDE EMPLOYER (Or other recipient of service, if uncompensated):

FUNDING ENTITY (Specify if different from outside employer)

INCLUSIVE DATES: FROM: \_\_\_\_\_ TO: \_\_\_\_\_ Location where activity is to be performed: \_\_\_\_\_

I *will* ( ) *will not* ( ) receive compensation for this activity. It is my belief that this outside activity will not interfere with the performance of my duties at The University of West Florida, nor will it create a conflict of interest with my position at UWF.

My normal duties at The University of West Florida will be accomplished during this period through the following arrangement: (Specify outside normal work hours, annual leave to be used.)

- ( ) I will not be using any University Resources in conjunction with my outside activity.
- ( ) I am requesting use of University Resources in conjunction with my outside activity and have completed and attached a *Request for Approval of Use of University Resources Form*.

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_

**DETERMINATION OF CONFLICT OF INTEREST** (To be completed by the appropriate Department Head)

- ( ) No conflict of interest is evident in the proposed outside activity
- ( ) The proposed outside activity is deemed to constitute a conflict of interest and permission to engage in such activity is not granted.

Department Head Signature \_\_\_\_\_

Date \_\_\_\_\_

**APPROVAL:**

\_\_\_\_\_  
Dean/Division Head

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President

\_\_\_\_\_  
Date

**REVIEWED:**

\_\_\_\_\_  
Office of Human Resources

\_\_\_\_\_  
Date

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Copy to: Employee

07/29/10

**REQUEST FOR APPROVAL OF USE OF UNIVERSITY RESOURCES IN CONJUNCTION  
WITH OUTSIDE ACTIVITY  
(Whether compensated or not)**

If requesting use of University resources in conjunction with Outside Activity, you must complete this form.

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**This Portion to Be Completed by Employee**

**Employee Name:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Date of Outside Activity: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Outside Activity/Employer:** \_\_\_\_\_

I hereby request permission to use the University resources listed below in the conduct of the aforementioned outside activity:

Facilities (list) \_\_\_\_\_

Equipment (list) \_\_\_\_\_

Services (list) \_\_\_\_\_

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**

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**This Portion to Be Completed By Department Head**

I recommend request for University resources be ( ) Approved ( ) Disapproved

\_\_\_\_\_  
**Department Head Signature**

\_\_\_\_\_  
**Date**

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**This Portion to Be Completed By Vice President for University Affairs**

The use of University resources is ( ) Approved ( ) Disapproved

If approved, indicate charges, if any, for use of University resources.

**RESOURCE**

**CHARGE**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Vice President University Affairs**

\_\_\_\_\_  
**Date**

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