



FACULTY REPORT — on OUTSIDE CONSULTING and/or EMPLOYMENT

INSTRUCTIONS: PER YSU/YSU-OEA AGREEMENT ARTICLE 28.4, "FACULTY MEMBERS MAY ACCEPT CONSULTING AND OTHER EMPLOYMENT OUTSIDE THE UNIVERSITY PROVIDED THESE ACTIVITIES DO NOT REPRESENT A DIRECT CONFLICT OF COMMITMENT OR INTEREST. A FULL-TIME APPOINTMENT TO THE FACULTY OF ANOTHER SCHOOL, COLLEGE, OR UNIVERSITY IS BY DEFINITION UNACCEPTABLE AND EXCESSIVE OUTSIDE EMPLOYMENT. THE EXTENT OF CONSULTING AND/OR OUTSIDE EMPLOYMENT MUST BE DISCLOSED EACH ACADEMIC YEAR ON A FORM PROVIDED BY THE UNIVERSITY PRIOR TO ACCEPTING OUTSIDE EMPLOYMENT." THIS FORM IS USED TO REPORT ENGAGEMENT IN OUTSIDE EMPLOYMENT AND/OR CONSULTING. AS A REMINDER TO EMPLOYEES ENGAGED IN OUTSIDE EMPLOYMENT AND/OR CONSULTING, IF YOU ARE MAKING CONTRIBUTIONS TO A RETIREMENT PLAN OUTSIDE OF THE UNIVERSITY, IRS ANNUAL LIMITS FOR CONTRIBUTIONS APPLY. IT IS YOUR RESPONSIBILITY TO ENSURE THAT YOU DO NOT EXCEED THE ANNUAL CONTRIBUTION LIMITS.

FIRST NAME: _____ LAST NAME: _____

RANK: _____ DEPARTMENT: _____

This report covers academic year 2017-2018.

I AM ENGAGED IN outside consulting and/or employment for _____ hours per week. If this activity changes, I will immediately file an updated report.

Please specify employer(s): _____

If you are teaching, or have taught at another institution, complete the following:

Name of Institution: _____

Course: _____ Semester/Quarter Hours: _____

I am NOT engaged in -- **and do not expect to be** -- engaged in outside consulting and/or employment during this academic year. I understand that in the event I **do** engage in outside consultation or employment, it is to be reported to the University and I will immediately file a report of this activity.

I am NOT engaged in -- **but expect to be** -- engaged in outside consulting and/or employment, during this academic year. I understand that in the event I **do** engage in outside consultation or employment, it is to be reported to the University, and I will immediately file a report of this activity.

FACULTY MEMBER: PLEASE SIGN BELOW AND FORWARD TO YOUR CHAIRPERSON. (THE FORM SHOULD BE ROUTED TO OBTAIN ALL NECESSARY SIGNATURES BEFORE BEING FORWARD TO HUMAN RESOURCES FOR RETENTION BY SEPTEMBER 30.)

I affirm that this report is accurate and true to the best of my knowledge. I also swear or affirm that any activities reported above do not interfere with my performance of my duties as a member of the University's full-service faculty.

Faculty member's Signature Date

CHAIRPERSON: PLEASE SIGN BELOW AND FORWARD TO YOUR DEAN.

DEAN: PLEASE SIGN BELOW, RETAIN COPY FOR YOUR FILES, AND FORWARD TO HUMAN RESOURCES.

I have reviewed the information on this report and have no reason to doubt its accuracy. In my opinion the consultation or employment reported above does not interfere with the faculty member's University duties.

Chairperson's Signature ~ Date

Dean's Signature ~ Date

IF EITHER REVIEWER CHOOSES NOT TO SIGN THIS REPORT, A WRITTEN EXPLANATION SHOULD BE ATTACHED.