UNLV CONFLICT OF INTEREST/COMPENSATED OUTSIDE SERVICES ANNUAL DISCLOSURE FORM

UNLV must comply with federal, state, and NSHE regulations related to conflicts of interest and compensated outside services. Based on these requirements, all faculty and professional staff must identify all potential conflicts of interest and all compensated outside service through annual submission of a completed Disclosure Form. For outside compensated activities that are not considered pre-approved activities (see http://www.unlv.edu/sites/default/files/page_files/27/Pre-approvedactivities_COI.pdf), supervisor approval must be obtained using the request for outside activities form (see http://www.unlv.edu/research/coi).

Individuals affiliated with the university through sponsored projects must disclose potential conflicts of interest prior to their participation in such projects. Additional information on the disclosure and review process is available in the Conflict of Interest Rules and Procedures (also see Conflict of Interest Policy).

All activities identified as conflicts of interest must be managed through management plans, reduction, or elimination. All employees must comply with NSHE policies regarding compensated outside services. UNLV must report conflicts of interest associated with sponsored projects to the relevant federal funding agencies, and both conflicts of interest and compensated outside services must be reported to the Board of Regents.

On an annual basis, and prior to submission for funding of any new project that may pose conflicts of interest or conflict due to compensated outside services, all University employees must provide information on the nature and extent of their compensated outside services and potential conflicts of interest/financial interests for the preceding 12 months using this Disclosure Form. Department chairs/supervisors are responsible for ensuring that all Disclosure Forms are received by the due date, which is set annually by the Executive Vice President and Provost. All University employees shall also disclose benefits known to an employee that may accrue to individuals in the employee’s household, persons to whom the employee is related by blood, adoption or marriage within the third degree of consanguinity, or persons with whom the employee has substantial and continuing outside business relationships.

Upon completion of this form, you will receive an email from coi@unlv.edu with a copy of your completed Annual Disclosure Form. If you are academic faculty, your completed Annual Disclosure Form will also be emailed to your department chair.

☐ I have read and understand the University’s policies on Conflict of Interest

Note: Questions in Grey will only be displayed if the condition is met.
PART 1: BIOGRAPHICAL INFORMATION

Employee Information

First Name
Last Name
Title
University Email
Department/Division

Supervisor Information

First Name
Last Name
Title
University Email

Employee Classification

☐ Administrative Faculty (Professional Staff)
☐ Academic Faculty
☐ Classified Staff

Contract Type

☐ 12-month contract
☐ 9-month contract
☐ Other ____________________

Are you a PI or Co-PI on any federally funded research project (for example, NIH, NSF)?

☐ Yes
☐ No

If Yes

Research Project(s)

Grant/Contract Title
Agency/Sponsor

Do you need to add another research project?

☐ Yes
☐ No
PART 2: OUTSIDE COMPENSATION AND TRAVEL

I ___________ perform compensated outside services (e.g., paid consulting, paid lectures, paid authorship, royalties, honoraria, or any other employment or services for payment) during the past calendar year. [http://www.unlv.edu/assets/research/policies/COI-RulesProcedures.pdf]

Did
Did Not

If you Did perform compensated outside activities AND are PI or Co-PI on a federally funded research project

Please provide a brief description of the outside activities and how they may relate or appear to be related to the funded research.

I ___________ engage in travel that was reimbursed or sponsored by a company or organization (excluding travel sponsored by a federal, state, or local government agency or a U.S. public university) during the past calendar year.

Did
Did Not

If you Did perform compensated outside activities OR Did engage in reimbursed/sponsored travel.

In accordance with the Conflict of Interest Rules and Procedures I confirm the following statement are correct: I took Annual Leave and/or furlough day(s) to perform outside compensated services, or that I am on a B contract and I did not exceed 1-day/week. Prior to commencing in these outside services, I completed an outside activity request form and received approval from my supervisor. Or, the activity was a pre-approved activity.

Yes, I certify the above statements are correct.

If you Did perform compensated outside activities

How many outside activities did you engage in during the past calendar year (2014)?
Note: This number should also include those pre-approved activities that did not require an outside activity request form.

______ Number Pre-Approved
______ Number Approved
______ Number Approved with a Management Plan
______ Number Denied
Of the requests identified above, how many were for each of the NSHE categories below. Note: Select ONLY one category for each activity (your total should equal the number of pre-approved, approved, and approved with management plan outside activities disclosed above).

_____ Academic
_____ Business
_____ Government
_____ Other

If you Did engage in reimbursed/sponsored travel.

Reimbursed or sponsored travel (i.e., that is paid on behalf of the Investigator) related to University responsibilities; however, this disclosure requirement does not apply to travel that is reimbursed or sponsored by a Federal, state, or local government agency, an Institution of higher education as defined at 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.

Purpose
Sponsor
Destination
Duration

I have more reimbursed travel to report.

☐ Yes
☐ No

How much compensation did you receive (combined) for:

_____ Total Compensation
_____ Total Reimbursed Travel
PART 3: EQUITY/OWNERSHIP AND INTELLECTUAL PROPERTY

Do you, your family members, or your household members, have an equity or ownership interest in any business entity whose business operations are related or potentially related to your responsibilities at the University (including your work on any sponsored project (grant or contract) you have or might apply for)? Include: stock, stock options and other securities. Do NOT include: stock owned through mutual funds or stock in a public company, if your ownership is less than $5000 or represents less than 5% ownership.

☐ Yes
☐ No

If Yes

Type of Interest

☐ Stock, stock options
☐ Other ownership rights
☐ Patents or patent applications
☐ Copyrights
☐ Licensing or other agreements

Interest Description

Do you have more interests to disclose?

☐ Yes
☐ No
PART 4: RELATIONSHIPS

Did you have a fiduciary or management role (such as, service as a president, chief financial officer, director or trustee), or legal obligation to any organization other than the University in the past year?

- Yes
- No

If Yes

<table>
<thead>
<tr>
<th>Relationship/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporate Officer</td>
</tr>
<tr>
<td>Board of Directors/Trustees</td>
</tr>
<tr>
<td>Advisory Board</td>
</tr>
<tr>
<td>Other __________________________</td>
</tr>
</tbody>
</table>

Was this a compensated relationship?

- Yes
- No

Was an outside activity request form completed for this activity/relationship?

- Yes
- No

Describe the relationship.

Do you have more relationships to disclose?

- Yes
- No
PART 5: OTHER

Are there any other matters bearing on conflict of interest or commitment that you wish to disclose to the University?

☐ Yes
☐ No

If Yes

Please explain the other matters you wish to disclose.