

UNC Charlotte Policy Statement #11
ATTACHMENT 1

CONFIDENTIAL PERSONNEL RECORD

**ANNUAL EVALUATION FORM FOR POSSIBLE
CONFLICT OF INTEREST OR COMMITMENT**

Name:

Title and Rank: Department/Unit:

Campus Address: Campus Telephone:

Completion of the following questions and associated Appendix forms is required of all faculty and EPA staff employees for compliance with the University Policy on Conflicts of Interest and Commitment. Appendix forms are available in the office of your department chair and dean.

This conflict evaluation form contains information that may have a direct bearing on your employment, and completing and filing this form is a condition of your employment. The form, therefore, will be included in your personnel file. As a part of the personnel file, the form will be considered strictly confidential. The information disclosed in the form is available only to individuals duly charged with the responsibility for review, and the information may be released only in accordance with and as required by North Carolina law or lawful court order.

If the answer to any of Questions 1-4 is YES, then complete APPENDIX A.

1. Do you or a member of your family have a significant financial interest in or serve in an executive position (including board membership) for a business (a) engaged in commercial or research activities in an area related to your University responsibilities, or (b) with which the University has a substantial contractual relationship, or (c) that sponsors research, testing, or service projects in which you are a participant?

YES NO

2. Do you or a member of your family have a significant financial interest, including compensation as a consultant, (a) in a business that might bias your University activity, (b) in a business that owns or has a contractual right to technology that is involved in research in which you are a participant, or (c) in a business that sponsors research, testing, service projects or other projects in which you are a participant?

YES NO

3. Do you supervise, select, or evaluate services or have a role in the selection of goods provided to the University by a business in which you or a member of your family has *any* financial interest; or do you refer University business to a business in which you or a member of your family has *any* financial interest? (Note: Answer this question "Yes" if you have *any* financial interest, however small, in the outside business, whether or not the interest is a "significant financial interest.")

YES NO

4. Do you participate in University clinical research on a technology developed by you or a member of your family?

YES NO

If the answer to any of Questions 5-6 is YES, then complete APPENDIX B. In addition, complete and submit the *Intent to Engage in External Professional Activities for Pay* form if you have not already done so.

5. Do you supervise or assign any undergraduate or graduate students, post doctoral fellows, or other trainees in connection with work on University projects sponsored by a business in which you or a member of your family has a significant financial interest?

YES NO

6. Do you employ or otherwise allow the participation of any students in your external professional activities for pay?

YES NO

If the answer to any of Questions 7-8 is YES, then complete APPENDIX C.

7. Have you published or formally presented University-sponsored research results or provided expert commentary on a related subject or served on a committee to evaluate technology owned or licensed by a business in which you or a member of your family has a significant financial interest?

YES NO

8. Are there any other matters referred to Categories II and III of the University Policy on Conflicts of Interest and Commitment in which you are involved that have not already been disclosed on this form?

YES NO

ACKNOWLEDGMENT

I hereby acknowledge that I have read and understand the Policy on Conflicts of Interest and Commitment and that the aforementioned facts and situations indicate all potential conflicts of interest and commitment with regard to my position at The University of North Carolina at Charlotte according to the standards and guidelines of the Policy. If I have none, I have so indicated in the spaces provided.

I acknowledge that I have a continuing obligation to file an updated form prior to filing the next annual report if changes arise that I believe may either: (a) give rise to a potential conflict of interest, or (b) eliminate a conflict previously discussed.

Signed this _____ day of _____, 2_____.

Signature: _____

UNC Charlotte Policy Statement #11

ADMINISTRATIVE REVIEW AND APPROVAL CONFLICT

OF INTEREST AND COMMITMENT REVIEW

To the best of my knowledge and judgment and according to the standards and guidelines of the Policy:

- a. No conflict of interest or commitment exists.
- b. A conflict of interest or commitment may exist, but does not appear to be significant. (Attach explanation.)
- c. A conflict of interest or commitment may exist that warrants further review.

SIGNATURES:

Department Chair _____ Date _____

Dean _____ Date _____
(If approval is required according to the Policy)

Vice Chancellor (If Applicable) _____ Date _____