Conflict of Commitment Disclosure Form for Staff
as Required by University Policy 1.24

Name: _____ Title: _____
Last First M.I.

SMU ID: _____Department/School/Unit: _____

For each Activity outside Position Expectations in which you wish to engage during Regularly Scheduled Work Hours, please answer the following questions. Attach separate pages, if necessary.

Name of Activity or Outside Entity: _____

Location and address (including country) of Activity:_____

_____

_____

_____

Start Date: _____ End Date: _____

A new Conflict of Commitment Disclosure Form must be submitted on an annual basis and whenever a new Activity arises.

Nature of the activity or relationship with outside entity:

… Research
… Teaching
… Consulting
… Editor
… Executive or Managerial Board Member
… Salaried Employee
… Other

Please describe the activity, including its relationship to University duties and responsibilities. Attach separate pages and supporting documents, if necessary:

Has this Activity been disclosed within the past year? Yes ☐ No

Are you receiving compensation? ☐ Yes ☐ No

If you are receiving compensation, please select the appropriate range:

$0-$4 …$25,000$49,999 …>$50,000

Date:_____

Date: _____