

Faculty, Academic Staff and Limited Appointees Report on Outside Activities and Interests

as required under [Section UWS 8.025 Wisconsin Administrative Code](#)

Name		Working Title	
Empl ID	Empl Record	FTE	Empl Class
Business Unit		Department	

Outside Activities Report 2024

Please review the Guidelines for reporting Outside Activities, [Wis. Admin. Code § UWS 8.025](#) and visit the Universities of Wisconsin Compliance and Integrity website for [OAR training and guidance](#).

- I have read the Guidelines and have Outside Activities to report in Sections A, B, C, and/or D below.
- I have read the Guidelines and do NOT have any remunerative outside activities or associations with organizations in my field of interest to report.

I agree and acknowledge that all the information submitted as part of this form is complete and correct to the best of my knowledge. I understand that a false statement may be grounds for discipline up to and including termination.

Employee Signature


Date

Complete those sections below (A through D) that apply to you for the current and prior calendar year.

A. Time Spent / Remuneration

I have engaged in outside activities in my field of professional interest with or without remuneration. A remunerative relationship is any relationship that results in payments, transfer of goods or provision of services to the reporting staff member.

List below the name of the organization or business, type of activity (e.g., consulting, research, teaching, writing, etc.), the average amount of time spent (hours per month) in the activity, and whether you received \$5000 or more from a single source. [SYS 1290 Guidance](#) clarifies that spending more than 16 hours per month on average towards outside activities presents the potential for material conflict and should be reviewed.

			Check if you received \$5000 or more from a single source
Business / Organization	Activity Name	Time Spent (Hours per Month)	
1.			<input type="checkbox"/>
2.			<input type="checkbox"/>
3.			<input type="checkbox"/>

If you believe that you should not publicly identify the name of the organization, you must receive approval from an appropriate administrator, as indicated by their signature on the form (e.g., if revealing the name would be damaging to the organization's legitimate competitive interests).

Administrator Signature *for organization name exemption.*

Date

- I have received compensation from a nongovernmental sponsor of university research, teaching, or training for which I am a principal investigator.

Name of Sponsor

Outside Activities Report 2024 (continued)

B. Offices and Directorships

Identify below any business or other organization related to your field of academic interest or professional specialization for which you or your immediate family served as an officer, director, or trustee. No identification need be made of professional societies, trusts, or charitable, religious, social, community service, or political organizations.

	Business / Organization	City	State	Position Held
1.				
2.				
3.				

C. Ownership Interests

List below any business or other organization related to your field in which you or your immediate family individually, or in aggregate, owned or controlled at least 10% of the outstanding equity.

	Business / Organization	City	State
1.			
2.			
3.			

D. Foreign Activities

The following questions are asked to identify paid or unpaid relations with foreign entities. For the purpose of this question, foreign talent recruitment programs involve the provision of compensation by a foreign state to a person in exchange for the individual transferring knowledge and expertise to the foreign state. Compensation could include cash, research funding, honorific titles, career advancement opportunities, promised future compensation or titles, or other types of remuneration or other consideration. This does not include an invitation by a foreign state to simply attend or present work at an international conference.

- Are you a Researcher? (A Researcher is any employee involved in research activities including the development of research proposals and the performance of research projects.)
 Yes No
- Have you or an immediate family member, currently or in the last twelve months, held an academic appointment at a foreign institution (paid or unpaid) or participated in a foreign talent recruitment program?
 Yes No

If you identified **Yes**, please briefly describe the nature of the academic appointment(s) or the talent program(s) and the involved party (e.g. you or your family member), and provide the name of the institution or foreign state, as well as relevant dates.

Describe the nature of the academic appointment(s) or the talent program(s):		
Involved Party	Institution Name or Foreign State	Dates

Approver Use Only

Information on the form has been reviewed and any apparent or potential conflict(s) have been resolved. Actions to address or resolve any apparent or potential conflict(s) of interest are documented in the comment section.

<input type="checkbox"/> Cancelled	Reviewer Signature	Reviewer ID	Reviewed Date/Time Stamp
<input type="checkbox"/> Approved by Reviewer			

Reviewer Comments:
