

**APM 025 - PRIOR APPROVAL FORM  
FOR CATEGORY 1 OUTSIDE PROFESSIONAL ACTIVITIES OR  
FOR INVOLVING STUDENTS IN OUTSIDE PROFESSIONAL ACTIVITIES**

*(Submit to Department Chair)*

NAME \_\_\_\_\_

FACULTY TITLE \_\_\_\_\_ AY \_\_\_\_\_ FY \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

DIVISION/SCHOOL \_\_\_\_\_

For each Category I outside professional activity in which you wish to engage, answer the following questions:

*Attach separate sheets, if necessary.*

1. Category and type of activity in which you will be involved:

**Category 1 Activities:**

Executive/Managerial Role  
Outside teaching or research activity  
Outside grant administration  
Salaried employee  
Other potential conflict of commitment

**Involving Students in Outside Activities:**

Required if the faculty member has, or expects to have, academic responsibility (instructional, evaluative, or supervisory) for the student, regardless of whether the faculty member has a financial interest in the activity.

2. General description of the business/agency/organization/group/individual:

\_\_\_\_\_

3. Activities/products/services of entity described above:

\_\_\_\_\_

4. Nature of your relationship to entity named above (check all that apply):

Founder/co-founder

Owner

Consultant

Board member

Salaried Employee

Stockholder/

Equity/royalty interest

Other, please explain:

partnership interest

5. Description of the nature of your participation in this activity, including, if you wish, possible beneficial outcomes to areas of research, industry, and public service:

\_\_\_\_\_

6. Beginning/ending month/year you could be involved in this activity: \_\_\_\_\_

7. Fiscal year(s) for which seeking approval: \_\_\_\_\_ (Approvals are generally for one fiscal year but may be granted for a longer term not to exceed five years. Compliance reports must be submitted annually.)

8. Estimated number of days' involvement during academic- or fiscal-year appointment: \_\_\_\_\_

9. Will you be requesting a full- or part-time leave, with or without pay, while engaged in this activity? \_\_\_\_\_

\_\_\_\_\_  
Faculty Member Signature                      Date

\_\_\_\_\_  
Chair Signature                                      Date

\_\_\_\_\_  
Dean Signature                                      Date

\_\_\_\_\_  
Vice Provost for Academic Affairs              Date  
Signature

Approval granted through fiscal year ending June 30, \_\_\_\_\_

Request denied