

Supplement to

Outside Financial Activity Disclosure

All salaried employees must complete this supplemental disclosure form when new outside activities and/or changes in previously disclosed activities occur.

Name: _____

SSN: _____

Title: _____

Dept.: _____

Please list previously undisclosed outside activities and/or indicate changes in disclosed outside activities that may present a conflict of financial interest or the appearance of such:

The above is an accurate and current statement of my reportable outside interests and activities.

Signature _____ Date: _____

The disclosed activities do not represent a conflict of interest.

Signature of Department/Unit Head Approve Date: _____
 Disapprove

Signature of Dean/Supervisor Approve Date: _____
 Disapprove

After all signatures are obtained, one copy is to be retained by the Dean/Supervisor, another copy by the Dept./Unit head, and another copy by the salaried employee.