



UPDATE FOR RESEARCH PURPOSES

GENERAL DISCLOSURE FORM

CONFLICT OF INTEREST AND EXTERNAL PROFESSIONAL ACTIVITIES

To be completed prior to the commencement of any new research project by all faculty members and Librarians governed by the Collective Agreement and provided to the chair/director (or dean in the case of non-departmentalized faculties). This form must be submitted in addition to the biennial disclose application submitted February 1st of each year.

Personal information:

a) Name _____;

b) Department _____;

c) Date of last Disclosure (if any) _____;

d) Name and position of chair, dean, or VP that form will be submitted to.

Name: _____ Position: _____.

1. External Professional Activities (Conflict of Commitment, Article 48)

a) Have you engaged in external professional activities which taken together involved a commitment of time in excess of a half working day per week over the past year?

Yes No

b) If you answered "Yes" to a), provide a description of the nature and scope of these activities (no reference to remuneration is required).

2. Conflict of Interest (Article 49)

- a) Since my last Disclosure, no circumstances have changed that would give rise to a conflict or potential conflict of interest in my current activities or those upcoming over the next year.
- b) Since my last Disclosure, situations have arisen that might place me in a conflict of interest with respect to my current activities or those which I expect to be engaged in over the next year.
- c) I did not file a Disclosure last year. Reason:
New Hire _____ Other _____

DISCLOSURE OF CONFLICTS OF INTEREST

1. I am or may be in a situation of conflict of interest or potential conflict of interest that affects or may affect (check all that apply):
 - a) my participation in a recommendation or decision or the process leading to any recommendation or decision to which the Framework Agreement applies;
 - b) my participation in matters pertaining to the financial or property interests of the University;
 - c) my use of a confidential information obtained in my employment that is personal information of other employees or that was intended to remain confidential;
 - d) my participation in a research activity or the submission of application for research funding;
 - e) my participation in an entity controlled by the University; or
 - f) other
2. Please attach a detailed description of the nature of any potential conflict of interest that was indicated above involving you and/or an immediate family member (spouse, partner, child or sibling). For more information about what constitutes a conflict of interest please contact Pamela Richards at directorfacultyrelations@uvic.ca

I certify that the information contained in this Disclosure is true and correct to the best of my knowledge.

I acknowledge that if any matter arises that gives rise to a conflict of interest prior to the time of filing my next Disclosure, I will promptly notify the next level of authority of the matter, in writing.

Signature _____ Date _____

Chair/Director Signature _____ Date _____

Dean Signature _____ Date _____

VPAC Signature _____ Date _____