



OFFICE OF RESEARCH SERVICES

UPDATE FOR RESEARCH PURPOSES

GENERAL DISCLOSURE FORM
CONFLICT OF INTEREST AND EXTERNAL PROFESSIONAL ACTIVITIES

To be <u>completed prior to the commencement of any new research project</u> 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)	d) Name and position of chair, dean, or VP that form will be submitted to.				
	Na	ame: Position:				
1.	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 If you answered "Yes" to a), provide a description of the nature and scope of these activities (no reference to remuneration is required).				

a) 🗆	•	circumstances have changed that t of interest in my current activiti	_			
b) 🗆	•	ations have arisen that might plac y current activities or those which				
c) 🗆	engaged in over the next year I did not file a Disclosure last New Hire	nr.	·			
DISCLOSU	JRE OF CONFLICTS OF INTEREST	_ Julie				
	or may be in a situation of conflict ts or may affect (check all that app		f interest that			
a) 🗆		nendation or decision or the proc				
b) □		pertaining to the financial or prop	• • • • • • • • • • • • • • • • • • • •			
c) 🗆	•	rmation obtained in my employmer employees or that was intended				
d) □	my participation in a researc research funding;	h activity or the submission of ap	plication for			
e) 🗆	my participation in an entity	controlled by the University; or				
f) □	other					
 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 prichards@uvic.ca certify that the information contained in this Disclosure is true and correct to the best of my knowledge. 						
			and and a three Cons			
	edge that if any matter arises that ny next Disclosure, I will promptly		•			
Signature		Date				
Chair/Dire	ector Signature	Date				
Dean SignatureDate						
VP∆C Sign	nature	Date				

2. Conflict of Interest (Article 49)