NOTICE OF INTENT TO ENGAGE IN EXTERNAL PROFESSIONAL ACTIVITIES FOR PAY

Instructions: The purpose of this Notice of Intent, which is required by UNC Board of Governors policy, is to ensure that any external professional activity for pay in which an NCSSM EPA employee engages does not create a conflict of interest with the employee’s institutional duties. Any EPA employees who are engaging in an external professional activity for pay during their NCSSM contract term should complete this Notice of Intent for each activity in which they will be engaging. This Notice of Intent should be submitted to the employee’s Dean, Director, or appropriate Vice Chancellor along with the NCSSM Advanced Leave Request form at least 10 (ten) days before the date the proposed activity is to begin. For any activity that will be ongoing over the course of a fiscal or academic year, the employee only needs to submit one Notice of Intent for that activity each fiscal or academic year.

Date: __________________

_________________________________________ (name) intends to engage in external professional activity for pay under the following conditions:

1. Name and address of contracting organization:

2. Nature of proposed activity:

3. Beginning date and anticipated duration of activity:

4. NCSSM contract term:
   ( ) 12 month employee   ( ) 11 month employee   ( ) 10 month employee

5. On average, how many hours per week will be devoted to this activity?
   a. For 12-month employees, for the anticipated duration of the activity, within the current fiscal year ending June 30:
   b. For employees employed for less than 12-months, for each component part of the academic year, as applicable, within the current fiscal year ending June 30 (see Paragraph II of UNC Policy 200.2.2.1[1]):
      (1) First Trimester:
      (2) Second Trimester:
      (3) Third Trimester:
      (4) Summer:

6. When will you be conducting your work on this activity?
   ( ) During the school day   ( ) Evenings   ( ) Weekends

7. Total number of hours to be devoted to activity:
8. Identify any classes, meetings, or other NCSSM duties that will be missed because of involvement in the proposed activity (respond separately for each applicable component part of the academic calendar) and state what arrangements have been made to cover any such duties. If you need additional space, please attach an additional sheet.

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<tr>
<th>Duties Missed</th>
<th>Arrangements to Cover</th>
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9. Use of NCSSM resources in connection with proposed activity:
   a. Will the activity entail the use of any NCSSM resources (see UNC Policy Manual, 300.2.2, Section I, Item G)?
      ( ) Yes    ( ) No
   b. If yes, describe what resources will be used.
      __________________________________________________________________________
      __________________________________________________________________________

10. To your knowledge, does the contracting organization above provide funding which directly supports any of your NCSSM duties or activities?
    ( ) Yes    ( ) No

11. To be completed if the contracting organization is a private firm:
   a. Do you or any member of your immediate family own an equity interest in the contracting organization?
      ( ) Yes    ( ) No
   b. Do you hold an office in the contracting organization?
      ( ) Yes    ( ) No

12. Performance of the above described activity is consistent with the Board of Governors Policy on conflicts of interest and commitment and external professional activities (300.2.2).

_______________________________________________________________________________
Signature          Date
_______________________________________________________________________________
Job Title and Department

*******For Administrative Use*************

( ) Approved    ( ) Not Approved (attach reasons for why activity was not approved)

_______________________________________________________________________________
Signature of Appropriate Dean, Director, or Vice Chancellor          Date