



**Conflict of Commitment Disclosure Form for Staff  
as Required by University Policy 1.24**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Last First M.I.

SMU ID: \_\_\_\_\_ Department/School/Unit: \_\_\_\_\_

For each Activity outside Position Expectations in which you wish to engage during Regularly Scheduled Work Hours, please answer the following questions. Attach separate pages, if necessary.

Name of Activity or Outside Entity: \_\_\_\_\_

Location and address (including country) of Activity: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

*A new Conflict of Commitment Disclosure Form must be submitted on an annual basis and whenever a new Activity arises.*

Nature of the activity or relationship with outside entity:

- Research
- Teaching
- Consulting
- Editor
- Executive or Managerial Board Member
- Salaried Employee
- Other

Please describe the activity, including its relationship to University duties and responsibilities. Attach separate pages and supporting documents, if necessary:

Has this Activity been disclosed within the past year? \_\_\_ Yes \_\_\_ No

Are you receiving compensation? \_\_\_ Yes \_\_\_ No

If you are receiving compensation, please select the appropriate range:

- \$0-\$4,999    \$5,000-\$9,999    \$10,000-\$24,999    \$25,000-\$49,999    >\$50,000

**Signatures**

Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Direct Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Dean/Vice President/  
Senior Vice President: \_\_\_\_\_ Date: \_\_\_\_\_

After obtaining approval from your direct supervisor, Dean and Vice President/Senior Vice President, this form and any supporting documents should be sent to [smuhr@smu.edu](mailto:smuhr@smu.edu).