University of Oregon CONFLICT OF INTEREST AND COMMITMENT DISCLOSURE FORM

The following form has been designed to identify Conflict of Interest and Commitment (COI-C) matters efficiently and effectively. A complete and accurate response to each question is essential to identifying and managing COI-C, especially those situations that might be perceived to affect the objectivity of publicly funded research and scholarship at the University of Oregon.

<u>All individuals must complete Section A and Section B</u>. The need to complete Section C is based upon the answers in Section B. If you answer "no" to all four questions in Section B, you do not need to complete Section C.

Instructions: (Step-by-Step Instructions are available at http://orcr.uoregon.edu)

- 1. First, open the form from the website and save the blank form to your computer. In order for your information to save properly, you will need to be using Acrobat Reader version 7 or higher. If you are unsure which version of Acrobat you currently have, please download the most recent version of Acrobat Reader. You can do this from the COI-C website. The link is in the lower right corner of the main page.
- 2. To input your answers, click in the field/box. Your input is limited to the visible space of the field/box.
- 3. To change or erase an answer, you can highlight the information and hit the "delete" key, or you can use the backspace key. To change a "yes/no" response, select the other answer.
- 4. Fields with drop-down menus have an arrow at the right-hand end of the field. Click on the arrow, then click on your selection.
- 5. For all items underlined and highlighted in <u>blue</u>, definitions have been provided at the end of this form. You can click on any of these items to navigate directly to Section D: Definitions. From the definitions page, you will need to use the scroll bar on the right hand side of the page to go back to your place in the form.
- 6. When you have completed the disclosure, please save the completed form, attach it to an email, then send it to coi@uoregon.edu.

Section A: Personnel Information Section

Please complete all applicable boxes below.

the previous calendar year.

From (mm/yyyy)

UO ID#		Toda	y's date			
Last Name		Title/	'Rank			
First Name		% Eff	Fort (FTE)			
College		Camp	pus Address			
Department/Unit		UO E	mail			
Center/Institute (if	applicable)			Campus Phone		
University Appointn	nent Period (CHECK ALL	THAT APPLY)				
9 Months	12 Months	Overload	Othe	r		
☐ 10 Months	Summer	Sabbatical				
Section B: Cor Please enter the 12-r		which you are discl	losing. This ra	inge is usually froi	m January to Dece	ember of

to (mm/yyyy)

Please answer the following four questions as they relate to your 12-month disclosure period.

l. Did you	have any relatio	nships with an <u>external entity</u> ? Such rela	ationship	os could include:
-hav -hold	ing <u>ownership inte</u> ding a <u>managerial</u>	enefit (e.g. salary or other monetary compe erest in the external entity or leadership role in the external entity oe of significant relationship with the exter		
NOTE:	if you have a per	rsonal consulting business, you yourself a	re consid	dered an external entity.
\bigcirc Y	ES ONC)		
	•	member had any relationships with an or to your field of academic expertise? S		•
-receiv	ring <u>pecuniary ber</u>	nefit (e.g. salary or other monetary compen	sation)	
-havin	g <u>ownership inter</u>	est in the external entity		
	_	<u>leadership role</u> in the external entity		
-havin	g some other type	of <u>significant relationship</u> with the externa	al entity, v	whether or not compensated.
\bigcirc Y	ES ONC)		
. Were yo	u the <u>Principal In</u>	vestigator (PI) or <u>co-Investigator</u> (co-PI)	on any U	JO sponsor funded activity?
\bigcirc Y	ES ONC)		
l. During y	our 12-month di	sclosure period, did you use <u>one-day-in</u>	-seven ti	ime?
○ Y I	ES ONC	•		
pplicable or example ompleting f Expanded	e Expanded Q e, if you answered all parts of Expand d Question #3.	Yes" to any of the four questions a uestions on the following pages. "yes" to Question #1 above, you will need to get the Question #1. If you answered "yes" to Question #1. If you answered "yes" to Questions above, you will four of the questions above.	o provide Question #	e additional information by #3, you need to complete all parts
•	name and today'	s date below, save the completed form	•	<u>-</u>
Potential (Conflicts of Interes	have read and understand the policy (Univ t, http://policies.uoregon.edu/ch3g1.html) lge, true and complete and does not omit o	. I affirm t	that the information I have provided
	nd that I must pro materially inaccura	vide an updated disclosure within 30 days ate.	if this info	ormation <u>materially changes</u> or
Name:			Date:	
	NOTE: To facili	itate the electronic submission process	s, your ty	ped name and date

above constitute your legal signature when this form is submitted via email.

Section C: Expanded Questions

EXPANDED QUESTION 1: Individual Relationships with External Entities

Many of the following questions include a "comments" field in which you may provide clarifying information.

1.1 Please state your a UO activities.	rea(s) of expertise and describe the key duties a	and responsibilities associated with	your
Describe:			
CONSULTING			
Entry is limited to the NOTE: Include you	outside consulting (self-employed), please comp he visible space for each field. r travel days in the " <u>1-in-7</u> Days Used" column, bu e expenses in the "Amount of <u>Benefit</u> " (payments)	ut do not include travel <i>expenses</i> or ot	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used

^{**}Continued next page**

Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
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Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
Name of Client	Describe Activity	Amount of Benefit	# of 1-in-7 Days Used
		\$	
f you need additional spac page will be sent to you.	ee, please contact the Office for Responsible Conduct of	Research, ccoyle@uoregon.edu, and an	additional

 \bigcirc NO

 \bigcirc YES

○ YES	○ NO				
•	swered "yes" to qı nsibilities?	uestion 1.4, did y	ou also advise or supervise	e these individuals as par	t of your
○ YES	\bigcirc NO				
Comments:					
OTHER EXTER	NAL RELATIO	NSHIPS			
If you had other be please complete Entry is limited to	the following info	ormation for each	al entities (such as with a pn entity.	ublisher, business, or adv	visory bo
NOTE: Include yo	our travel days in t	the "1-in-7 Days l	Jsed" column, but do not i enefit" (payments) column	-	r other
Name of Entity	Type of Rela	ationship	Describe Activity		
Name of Entity	Type of Rela	ationship	Describe Activity		
Name of Entity		of Benefit	Describe Activity	Amount of Benefit	
Name of Entity		·	Describe Activity	Amount of Benefit	
Name of Entity Name of Entity		of Benefit	Describe Activity Describe Activity		
	Type Type of Rela	of Benefit ationship		\$	Days Us
	Type Type of Rela	of Benefit		\$ Amount of Benefit	# of 1-ir
	Type Type of Rela	of Benefit ationship		\$	Days Us
	Type Type of Rela	of Benefit ationship of Benefit		\$ Amount of Benefit	Days Us
Name of Entity	Type of Rela	of Benefit ationship of Benefit	Describe Activity	\$ Amount of Benefit	# of 1-ir Days Us
Name of Entity	Type of Rela	of Benefit ationship of Benefit	Describe Activity	\$ Amount of Benefit	# of 1-ir Days Us # of 1-ir Days Us

^{**}Continued next page**

Name of Entity	Type of Relationship	Describe Activity		
	Type of Benefit		Amount of Benefit	# of 1-in-7 Days Used
			\$	
Name of Entity	Type of Relationship	Describe Activity		
	Type of Benefit		Amount of Benefit	# of 1-in-7 Days Used
			\$	
Name of Entity	Type of Relationship	Describe Activity		
	Type of Benefit		Amount of Benefit	# of 1-in-7 Days Used
			\$	
○ YES	? (Copies of written agreements r	,		
1.7 If you had <u>own</u> ownership inte	ership interest in an external entirest?	ty, what was the percent	age of ownership and the v	alue of that
Percent of Own	ership = %			
Value of Owner	ship \$	Unknown		
Comments:				
•	ionships with other <u>external entit</u> ponsibilities with that entity?	<u>ties</u> , did you supervise an	y UO students or other UO	employees
○ YES	\bigcirc NO			
•	wered "yes" to question 1.8, did nsibilities?	you also advise or superv	ise these individuals as par	t of your
				
Commen	ts:			

CONSULTING AND ALL OTHER EXTERNAL RELATIONSHIPS

•	•	•	tion 1.1), please describe what y		
			st and commitment with your co IO employees, if applicable).	onsulting clie	nt(s) and/or other
<u>external enti</u>	(and With 00				
Describe:					
•	·	will continue similar	relationships and activities in th	ne coming yea	r?
○ YES	○ NO				
Comments:					
1.11 Did your cli	ent(s) or other <u>ex</u>	<u>kternal entities</u> have	any of the following relationshi	ips with the U	0?
Supplie	er	Recipient of G	rant Technical Assistance		
☐ Vendo	•	Use of UO Faci	lities		
Researc	ch Collaborator	Licensee of UC) Innovation		
Unknow	wn	Other			
xpanded Que	stion 2: Fami	ily Member Relatio	onships with External Entitie	S	
-		•	field in which you may provide		formation.
2.1 For any <u>imm</u>	ediate family me	mber(s) involved wi	th <u>external entities</u> related to yo	our <u>UO activiti</u>	<u>es</u> , please
complete the foll	owing set(s) of ir	nformation. Please u	se a separate set for each family	/ member and	/or entity.
Family Relationship	Name of Entity	Type of Bo	enefit		Amount of Benefit
					\$
Type	of Relationship		Activity (what family member did for	entity) Annro	κ. Dates of Activity
Турс	. or netationship		1	- Approx	
How	family member act	tivity relates to your UC) duties		
Family Relationship	Name of Entity	Type of Bo	enefit		Amount of Benefit
					\$
Туре	of Relationship		Activity (what family member did for	entity) Approx	κ. Dates of Activity
	-		· 1		
How	family member act	tivity relates to your UC) duties		

If you need additional space, please contact the Office for Responsible Conduct of Research, ccoyle@uoregon.edu, and an additional page will be sent to you.

2.2	Do you anticipat	e that your <u>immediate family member</u> will continue similar relationships and activities in the vear?
	YES	ONO
	Comments:	
2.3	that is related to member's activit	<u>e family member's</u> work involves having a <u>managerial or leadership role</u> with an <u>external entity</u> your academic field of expertise, it can result in <u>conflicts of interest</u> . Please describe your family ies and responsibilities for the external entity and what has been done to disclose, mitigate, or ial conflicts of interest.
	Describe:	
	Were you engag member has a re	ed in <u>sponsor funded activity</u> with or for the <u>external entity</u> with which your <u>immediate family</u> lationship? ○ NO
	Comments:	
25	Were UO studen	ts or other UO employees involved with this external entity?
2.3	YES	NO Unknown
	Comments:	
	•	swered "yes" to question 2.5, did you advise or supervise any of these students or employees as our UO responsibilities? NO
	Comm	nents:
2.6	If "ownership int	erest" was selected in question 2.1, what percent interest is owned?
	2.6.1 If the ow	nership interest is 5% or greater, what is the estimated value of the interest?
	\$	Unknown

☐ Stock Option ☐ Warrants ☐ Other		Membership/Own	
*LLC = Limited	Liability Company		
Comments:			
2.7 Does the external en	ntity have any of the following re	lationships with	h the UO? Check all that apply.
Supplier Vendor Research Collabora	☐ Receipt of Grant Techr☐ Use of UO Facilities ion ☐ Licensee of UO Innova		☐ Unknown ☐ None of the Above ☐ Other
Comments:			
Many of the following qu		·	ou may provide clarifying information. e past calendar year Check all that
apply.			-
I have received fund	_		
☐ DHHS/NIH☐ USDE☐ DOD	☐ Federal -Other☐ Non-Federal-Other	(list)	
☐ NSF ☐ SBIR/STTR ☐ Industry	☐ Foundation	(list)	
Comments:			

2.6.2 What form does the <u>ownership interest</u> take? Check all that apply.

year. Check all	that apply.				
I have applie	ed for funding fr	rom:			
☐ DHHS/NII	Н	Federal -Other	(list)		
USDE		☐ Non-Federal-Other	(list)		
☐ DOD			(1130)		
☐ NSF	_	Foundation	(list)		
SBIR/STTI	К				
☐ Industry					
Comments:					
•		olve <u>Human Subject Resea</u> nd forward to the next cale		OTE: this question both looks back at ear.	
○ YES	\bigcirc NO				
Comments:					
C If " wh	YES () yes", please brie	NO efly describe the aims of y medical Human Subjects F	our hun Research	Subject Research biomedical in nature? nan subject research. Please indicate n includes any drugs or devices. You may re in place of a description.	
De	escribe:				
<u>co-Pl</u> or other	key personnel	<i>year</i> was your spouse, par on your <u>sponsor funded r</u>		other member of your <u>immediate family</u> the project?	
○ YES	ONO				
Comments:					
				nded activity for which your spouse, s your co-PI or as key personnel?	
○ YES	\bigcirc NO				
Comments:					

3.2 Indicate the funding source(s) to which you are applying for funding for the coming calendar

EXPANDED QUESTION 4: Use of One-day-in-seven Time

One-day-in-seven time is a privilege granted to UO faculty and other employees holding an unclassified appointment under Oregon Revised Statute 351.067 and applies only to activities *related* to one's UO responsibilities. Activities unrelated to UO responsibilities must be engaged in during times the individual is not under contract to the UO. A reasonable amount of averaging of this time allowance is permitted over quarters or semesters, provided that the averaging does not unduly interfere with the faculty member's primary responsibilities to UO. Travel time is included when counting one-day-in-seven time usage.

For assistance determining how much one-day-in-seven time you may have available to you, please see the <u>One-Day-in-Seven Table.</u> on page14 of this form.

Activities that do not require prior approval

In the absence of other <u>conflict of interest or commitment</u> concerns, two activities that do not require prior approval are work with professional organizations and other academic institutions. University faculty and other employees are encouraged to participate in scholarly, professional, and philanthropic activities outside the University. In the absence of other conflict of interest or commitment concerns, it is thus appropriate for individuals to accept invitations to serve on advisory bodies or public commissions related to their academic or professional work, as well as to travel to other institutions or conferences for the purpose of presenting lectures, leading seminars or workshops, or visiting the laboratories of colleagues.

Activities that do require prior approval

Nearly all <u>outside activities</u> require the approval of one's Supervisor, Department Chair, Director, and/or Dean *prior to initiating the activity.*

These include, but are not limited to:

- a) Acceptance of compensation from (other than standard honoraria in one's field of expertise for scholarly speaking engagements) or ownership or equity in, an <u>external entity</u> that carries on activities closely related to the individual's area of work.
- b) Service in a line management position in such an external entity or participation in the day-to-day operations of the same. Significant management roles (those that involve supervision of the work of others and/or the day-to-day responsibility for operating decisions) in private business typically are demanding both in terms of time and energy. It is unlikely that such roles can be fulfilled within allowable use of one-day-in-seven-time. Depending on the circumstances of the request it may be necessary for faculty to take a leave of absence from their University activities in order to take on a significant management role in an outside entity; doing so while on sabbatical is not generally appropriate.
- c) Service in a key, continuing role in a private or outside public entity.

If you have questions regarding use of One-Day-in-Seven time, please discuss it with your supervisor.

ı	i you nave que	uestions regarding use of One-Day-in-Seven time, please discuss it with your st	ipei visoi.
4.1	How many one	ne-in-seven days did you use in the previous calendar year?	
4.2	into your UO cavailable days of	ibe your use of <u>one-day-in-seven</u> time for <u>overload</u> and/or <u>outside activities</u> and how obligations. (For example, if you are .75 FTE for the UO with a 9 month appointment, you would hat of one-in-seven time per calendar year. At .75 FTE, however, you also have the remaining .25 FTE available vities. Please explain how your outside activities and/or overload fit into your <u>total available time.</u>)	ve 29
	Describe:		

4.3 Do you intend to use <u>one-day-in-seven</u> time in the coming calendar year?

\cap	ν	ES	NO
N /		LJ	110

Section D: Definitions

- **~**Collaborative Investigator A co-investigator on sponsored or non-sponsored research, and can be either a UO or non-UO faculty member.
- ~ Conflict of Commitment (COC)- those overload or outside activities which conflict or appear to conflict with a faculty member or other UO employee's University activities of teaching, research, service, and administration.
- ~Conflict of Interest (COI)- A conflict of interest may occur when an employee is in a position to make a decision in his or her capacity as a university employee that may result in personal or family gain, financial or otherwise. Per the Oregon Revised Statues (ORS 244.020(11)) defines "potential conflict of interest" as follows: "Any action or any decision or recommendation by a person acting in a capacity as a public official, the effect of which would be to the private pecuniary benefit or detriment of the person or a member of the person's household, or a business with which the person or a member of the person's household is associated, unless the pecuniary benefit or detriment arises out of the following: (a) An interest or membership in a particular business, industry, occupation, or other class required by law as a prerequisite to the holding by the person of the office or position. (b) Any action in the person's official capacity which would affect to the same degree a class consisting of all inhabitants of the state, or a smaller class consisting of an industry, occupation, or other group including one of which or in which the person or a member of the person's household or business with which the person is associated, is a member or is engaged."
- ~Co-Investigator (Co-PI)- The Financial COI regulation defines investigator as the principal investigator and any other person who is responsible for the design, conduct, or reporting of funded research, and it includes the investigator's spouse and dependent children (42 CFR § 50.603). The regulation is very broad in its definition of investigator, and faculty are encouraged to consider the roles, rather than the titles, of those involved in research and the degree of independence with which those individuals work.
- ~ External Entity- can be any or all of the following: a natural person capable of being legally bound, sole proprietorship, corporation, partnership, limited liability company or partnership, limited partnership, for-profit or nonprofit corporation, unincorporated association, business trust, two or more persons having a joint or common economic interest, or any other person with legal capacity to contract, or a governmental agency or governmental subdivision.
- "Human Subject Research- Human Subject Research at the UO includes all activities that are "research", and involve "human participants" according to The Common Rule, and includes all activities that are "research" according to FDA regulations. According to The Common Rule, "research" is a systematic investigation, including clinical investigations, research development, testing and evaluation, designed to develop or contribute to generalizable knowledge and "human participants" are living individuals about whom the investigator conducting research obtains (a) data through intervention or interaction with the individual or (b) identifiable private information (45 CFR Part 46). According to FDA regulations, "research" is any experiment that involves a "test article", that is, any drug or biological product for human use, a medical device for human use, a food additive or color additive intended for human use, an electronic product or any other article subject to regulation by the Food, Drug, and Cosmetic Act; and one or more individuals who are either recipients of the test article or controls; and that either involves a drug or medical device (other than the use of an approved drug or device in the course of medical practice) or the results of the research are intended to be later submitted to, or held for inspection by, the Food and Drug Administration as part of an application for a research marketing permit.
- ~Immediate Family Members- includes spouses, dependent children, domestic partners, parents, and siblings.
- **Managerial or Leadership Role** a significant role in the day-to-day operations of and/or strategic planning for an external entity.
- ~Management Plans- are the annually or more frequently updated, detailed plans for resolution/mitigation of a conflict of interest and/or commitment, upon which the faculty member and/or other UO employee as well as his or her immediate supervisor, Department Head, Director, Dean, Vice Provost, and Vice President (as appropriate, have agreed.

- ~Materially Changed a substantive change in the information disclosed annually. Examples of material changes include, but are not limited to: a single consulting job that results in pecuniary benefit equal to or exceeding \$25,000, the offer to take a line management role in an external entity not previously disclosed or approved, ownership of an external entity greater than 5% not previously disclosed or approved.
- ~ One-day-in-seven- is a privilege granted through ORS 351.067 permitting individuals holding an unclassified appointment to engage in overload and/or outside activities one day in each seven day week that are related to the area of expertise for which the individual was hired. A limited amount of averaging or aggregating of days is permitted so long as it is not to the detriment of an individual's UO obligations and does not involve prohibited compensation. The number of allowed days is prorated for appointments that are less than 1.0 FTE.
- ~ Outside Activity- are those activities engaged in by UO faculty and other UO employees, whether or not compensated, that are not specifically a part of their University activities. Such activities include (a) participation in scholarly, professional and philanthropic activities outside UO; (b) service on advisory bodies or public commissions related to the individual's academic or professional work; (c) travel to other institutions or conferences for the purpose of presenting lectures, leading seminars or workshops or visiting the laboratories of colleagues; and (d) limited consulting. See ORS 351.070 for more specific details.
- ~<u>Overload Activities</u>- are additional, (non-stipend) paid services for campus sponsored activities above an individual's salaried compensation. Typical overload activities include: continuing education, extension services, internal consulting, non-emergency paid teaching overloads, and similar services.
- ~ Ownership Interest any interest that provides ownership roles and/or privileges in a not- or for-profit external entity.
- ~Pecuniary Benefit financial benefit that includes not only money, but also any benefit measurable in terms of money (e.g. gifts in kind, travel, etc.).
- ~Principal Investigator (PI)- the Financial Conflicts of Interest regulation (42 CFR § 50.603) defines investigator as the principal investigator and any other person who is responsible for the design, conduct, or reporting of funded research. This definition, as it relates to financial interests, also includes the investigator's spouse and dependent children. As this regulation is very broad in its definition of investigator, and we therefore encourage you to consider the roles, rather than the titles, of those involved in research and the degree of independence with which those individuals work.
- ~Professional Organizations are those scholarly and professional entities which promote knowledge in one's area of expertise.
- ~Significant Financial or Fiduciary Interest- the federal research regulations define "significant" as financial interests exceeding \$10,000 or representing more than 5% ownership regardless of dollar value.
- ~<u>Significant Ownership Interest</u>- refers to the right by which a thing (whether tangible or intangible) belongs to someone in particular, to the exclusion of all others. Ownership can be shared, as in co-ownership. **Significant** ownership, per UO policy, refers to ownership in the amount of 5% or greater.
- ~<u>Significant Relationship</u>- any relationship with an external entity, be it economic or otherwise, as owner, investor, director, trustee, partner, employee, or consultant, or any other relationship in which an individual has control or input into the direction of business practices or research.
- ~ Sponsor Funded Activity any activity managed by the University where funding comes from an outside source (e.g. federal grant, private donation, etc.).
- ~ <u>University Activities</u>- those teaching, research, administration and service activities that are a part of one's UO employment obligations.

USE OF ONE-DAY-IN-SEVEN TIME

Receipt of compensation from private or public resources for any officer or employee of the Oregon University System is a privilege granted through Oregon Revised Statute 351.067. The UO Policy, Guidelines for Overload Compensation for Faculty, limits activities involving overload time to not more than one day in a seven day week on an average or its equivalent during the academic year or other period of appointment.

This permits individuals holding an unclassified appointment to engage in over load and/or outside activities one day in each seven day week that are *related* to the area of expertise for which the individual was hired. The outside activity will contribute to the University's mission of teaching, research, and public service. A limited amount of averaging or aggregation of days is permitted so long as it is not to the detriment of an individual's UO obligations and does not involve prohibited compensation. The number of allowed days is prorated for appointments that are less than 1.0 FTE.

Activities unrelated to UO responsibilities must be engaged in during times the faculty member is not under contract to UO.

One-day-in-seven time is not a broad license to engage in unlimited overload or outside activities. Rather, it permits: (a) faculty members to participate in additional, paid services for campus sponsored activities above their salaried compensation; (b) participation i scholarly, professional and philanthropic activities outside UO; (c) service on advisory bodies or public commissions related to the faculty member's academic or professional work, (d) travel to other institutions or conferences for the purpose of presenting lectures, leading seminars or workshops or visiting the laboratories of colleagues; and (e) limited consulting that is not to the detriment of UO obligations and does not involve prohibited compensation.

UO FTE	Ppointment Period		
	9 Month	10 Month	12 Month
0.05	2	2.2	2.6
0.10	3.9	4.3	5.2
0.15	5.9	6.5	7.8
0.20	7.8	8.6	10.4
0.25	9.8	10.8	13
0.30	11.7	12.9	15.6
0.35	13.7	15.1	18.2
0.40	15.6	17.2	20.8
0.45	17.6	19.4	23.4
0.50	19.5	21.5	26
0.55	21.5	23.7	28.6
0.60	23.4	25.8	31.2
0.65	25.4	28	33.8
0.70	27.3	30.1	36.4
0.75	29.3	32.3	39
0.80	31.2	34.4	41.6
0.85	33.2	36.6	44.2
0.90	35.1	38.7	46.8
0.95	37.1	40.9	49.4
1.0	39	43	52