

**FORM 35
DISCLOSURE OF RELATIONSHIPS WITH OUTSIDE ORGANIZATIONS**

Name: _____	Title: _____
Department: _____	Date: _____
External activity reported on corresponding Form 32A: _____	

The following disclosure form is designed to accompany Purdue University's policy on conflicts of interest and commitment. Before completing this form, please read the accompanying policy statement (Executive Memorandum C-39) carefully, in particular the sections on Types of Conflicts and operating definitions of capitalized terms. Note that Form 35 asks for information on activities that may be allowable only after disclosure, review, and approval. Please answer all questions, indicating "none" where appropriate. You may append additional information on a separate sheet.

I. RESEARCH ACTIVITIES

A. Do you currently, or do you expect during the next twelve months to receive Sponsored Research from a Business in which you, a member of your Family, or an Associated Entity holds stock or similar ownership interest? yes no

If yes, please provide the following information:

Business providing sponsored research support: _____

Description of research and relevant dates: _____

Research Support (in dollars or kind): _____

Party holding equity or similar ownership interest: _____

Extent of ownership: _____

Your relationship to party with Financial Interest: _____

B. Do you currently, or do you expect during the next twelve months to Participate* in any research activity on a University Technology assigned to or contractually obligated to a Business in which you, a member of your Family, or an Associated Entity has a Financial Interest,*** other than receipt of royalty income through the University? yes no**

If yes, please provide the following information:

Description of Technology: _____

Business to which the Technology is obligated: _____

Party with Financial Interest: _____

Your relationship to party with Financial Interest: _____

Nature and extent of Financial Interest: _____

*Principal investigator, researcher, supervisor, advisor, technician, other (please specify).

**By license or exercise of an option to license.

***For example: equity, consulting income, salary for Board compensations, memberships, etc.

C. Do you currently, or do you expect during the next twelve months to Participate* in any externally sponsored research or educational activities that could directly affect (benefit or harm) the business scope of an Entity, or financial interests of entities, in which you, or a member of your Family, have/has a Financial Interest*** other than receipt of royalty income through the University? yes no**

If yes, please provide the following information:

Description of research or educational activities: _____

Entity/entities that could be affected by the research or educational activities: _____

Party with Financial Interest: _____

Your relationship to party with Financial Interest: _____

Nature and extent of Financial Interest: _____

*Principal investigator, researcher, supervisor, advisor, technician, other (please specify).

**Company, other for profit entities.

***For example: equity, consulting income, salary for Board compensations, memberships, etc.

D. Do you currently, or do you expect during the next twelve months to Participate* in research related to a Technology which you or a member of your Family developed outside of the University? yes no

If yes, please provide the following information:

Technology: _____

Your relationship to the Inventor(s): _____

Licensee, if any, of the Technology: _____

*Principal investigator, researcher, supervisor, advisor, technician, other (please specify).

E. Do you currently, or do you expect in the next twelve months, to assign any students, postdoctoral fellows, or other trainees, to projects sponsored by a Business, or that could affect (benefit or harm) a Business/entity in which you, a member of your Family, or an Associated Entity has a Financial Interest? yes no

If yes, please provide the following information:

Name(s) of students, fellows, and other trainees: _____

Name of Business providing research support/affected by research: _____

Description of research and relevant dates: _____

Party with Financial Interest: _____

Your relationship to party with Financial Interest: _____

Nature* and extent of Financial Interest: _____

*For example: equity, consulting income, salary, etc.

II. CONSULTING ACTIVITIES

A. Do you currently consult for or receive any form of compensation pertaining to services or contracts between any Business and the University? yes no

If yes, please provide the following information:

Name of Business: _____

For profit or non-profit: _____

Your titles/duties: _____

Nature of Contract or Services between the Business and the University: _____

Estimated* annual compensation: _____

*If compensation is not received in dollars, but rather in some other form such as equipment, stock, stock options, or any similar ownership interest, please indicate and include an estimated dollar –range value of such compensation and the basis for such evaluation.

B. Do you currently consult for, or receive any form of compensation from a Business/Entity whose financial interests may be affected (positively or negatively) by the outcome of your research?

yes no

Please check here if the entity is the same as in Section A above.

If yes, please provide the following information:

Name of Business: _____

For profit or non-profit: _____

Your titles/duties: _____

Please list the sponsor and the relevant research project/s: _____

Estimated* annual compensation: _____

*If compensation is not received in dollars, but rather in some other form such as equipment, stock, stock options, or any similar ownership interest, please indicate and include an estimated dollar –range value of such compensation and the basis for such evaluation.

III. REFERRAL ACTIVITIES

As a faculty or staff member, are you in a position to make referrals of University activities to any Business in which you, a member of your Family, or an Associated Entity has a financial interest? yes no

If yes, please provide the following information:

Name of Business: _____

Description of the Business*: _____

For profit or non-profit: _____

Party with Financial Interest: _____

Your relationship to party with Financial Interest: _____

Nature and extent of Financial Interest: _____

*For example: consulting business, testing facility, etc.

IV. GENERAL

Are there any other related matters of which you wish to make the University aware? yes no

Please explain:

I have answered this questionnaire to the best of my ability and will promptly file an update in the event of changes.

Signature Date

Print Name