

Notice of Intent to Complete Outside Work

Please complete each section in the space provided. Attach additional pages or materials, as needed. Date

1.	Employee Information
	Name:
	Department or Center:
2.	Outside/Contracting Organization
	Name:
	Primary Contact:
	Email:
	Phone:
	Address:
3.	Briefly Describe the Nature of the Proposed Outside Work
4.	Dates of Proposed Outside Work Note: All dates must fall within a single fiscal year ending June 30. For work extending beyond a single fiscal year (i.e., beyond June 30), a separate Notice of Intent to Complete Outside Work form must be submitted.

Total # of

hours

Total # of

months

Ending Date (MM/DD/YYYY)

Starting Date: (MM/DD/YYYY)

Avg. # of hours

per month

5.	Missed University Work Identify any meetings or res Work:	c sponsibilities that will be missed because of this proposed Outside	
	What arrangements are pro	posed to cover any missed responsibilities?	
6.	University Resources		
	Will the proposed Outside V	Vork use any University resources?	
	Yes	No	
	If yes, please describe what those resources.	resources will be used and how the University will be reimbursed for	
7.	Conflict of Interest Why is the proposed activity more appropriate as Outside Work instead of a direct contractual agreement or service agreement or sponsored research project with the University?		
	Organization provide any furesponsibilities?	Contracting Organization or clients of the Outside/Contracting anding to UGA that directly support any of your University	
	Yes	No	
	If yes, please describe.		
	Do you intend to use any ex	isting UGA intellectual property in performing the Outside Work?	
	Yes	No	
	If yes, this request must be	reviewed by Sponsored Projects Administration.	

Are you required to assign curr Outside/Contracting Organizat	Are you required to assign current or future intellectual property rights to the Outside/Contracting Organization under the proposed Outside Work?			
Yes	No			
If yes, please describe.				
Does the scope of work of your proposed Outside Work overlap with any assigned work responsibility, or sponsored or service project you currently are performing at UGA, or that yo plan to perform at UGA in the future?				
Yes	No			
8. Please provide any addition Are supplemental materials att		ant to this request:		
Employee Signature		Date		
Approvers:				
Dept. Head/Director	Signature	Date		
Dean or Dean's Designee Or	Signature	Date		
Vice President/Associate Provost /Director	Signature	Date		