

UNIVERSITY OF HAWAI'I DISCLOSURE FORM

PART II

CONFIDENTIAL DISCLOSURES

**Detailed statement of Outside Interests and Activities**  
(when applicable)

Name \_\_\_\_\_ Date \_\_\_\_\_

School/College/Unit \_\_\_\_\_

Department/Subunit \_\_\_\_\_

**1. Ownership Interests**

If during the past calendar year you or members of your immediate family owned or controlled an equity interest in any organization in your field of academic interest or specialization, give details below.

<b>Organization</b>	<b>City &amp; State</b>	<b>Nature of Business</b>	<b>Relationship of Family Member</b>
_____	_____	_____	_____

**2. Officer and Positions**

Please give details if, during the past calendar year, you or a member of your immediate family were a director, officer, partner, employee, or agent or in any managerial position of any organization outside the University of Hawai'i that might be affected by your research, creative, or administrative activities. (You need not answer with respect to governmental committees, community, political, academic, charitable, religious, social, or professional nonprofit organizations.)

<b>Organization</b>	<b>Position</b>	<b>City &amp; State</b>	<b>Nature of Business</b>	<b>Relationship of Family Member</b>
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**3. Remunerative Activities**

Please give details if, during the past calendar year, you have received income (cash or in-kind, other than reimbursement of reasonable expenses) related to your teaching, research, creative, or administrative activities from any organization outside the University and its affiliated entities in excess of 1% of your University salary. (Exclude listing any income totaling \$500 or less [cash or in-kind] from any one source on an annual basis.)

<b>Organization</b>	<b>Nature of Business</b>	<b>Does the total annual remuneration per year exceed 1% of your University salary? (answer yes or no)</b>
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4. **Outside Employment of students or Staff**

Do you now, or did you during the past calendar year, employ any of your students or staff in a company or organization outside the University? If so, please list below.

<u>Name of Student/Staff</u>	<u>Employer</u>	<u>Effort (Hrs/Year)</u>
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5. **Other Transactions or Facts**

During the past calendar year, did you or any member of your immediate family have an interest in any contract, sale, or other transaction to which the University of Hawai'i or one of its affiliates was a party, or are there other situations, not listed above, that you believe may create an actual or perceived conflict of interests? (Exclude your own or your spouse's employment contract with the University.) Please identify such transactions or facts, including date, parties, subject matter, etc.

The above is an accurate and current statement of all my reportable outside interests and activities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed this form and find (no) reason for further action.

Typed Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Supervisor

Signature: \_\_\_\_\_