Annual Report on Outside Professional Activity and Continuing Education

This form is to be submitted annually by faculty members who are required to report on outside professional activity or continuing education under the university's policies concerning outside professional activity and employment, research, and continuing education.

Name (Last, First):		Academic Rank/Title:					
Employee ID:		College:					
Department:		Reporting Period*: *Beginning and ending dates of contractual obligation					
	List Activities in A						
	(extend on sup	plemei	ntal shee	t, if necess	ary)		
		Number of Days					Compensation
Start Date	Organization sponsoring or receiving the service	ОС	OA Comp	OA Clinical Practice	OA Uncomp	Other (specify)	beyond expenses
Faculty N	Лember:						
Signa			ature				Date
Chair:							
Signa		ature					Date
Dean:							

Submit original request to Dean's Office. The approved original form will be returned to the appropriate Department Chair for record retention.

Date

Signature