FORM 3260 A University of Idaho **CONSULTING: Request to Engage in Professional Consulting**

[Approval must be received prior to any consulting activity]

| Nama |
|--|
| Name: Department: |
| Phone: |
| Mailing and E-mail Address: |
| Dates/times of professional consulting: fromto |
| |

[Attach additional pages if necessary]

- Describe the subject, scope and purpose of consulting activity including client details:
- Provide an estimate of the amount of time that will be required to complete the consulting activity:
- State whether the proposed activity will require the use of University resources, and if so, identify the resources you would use:

If your consulting activity will require the use of university resources (i.e., supplies, equipment, or facilities), you must enter into a contract with the University to use those resources at a reasonable rate. The contract for use of University resources must be approved and signed by the [Vice President for Finance and Administration or his designee, and must be executed prior to initiation of the consulting activity.]

I affirm that I have read and understand FSH 3260 and 6240 and that the professional consulting described above:

- is compatible with my professional competence,
- does not constitute unfair competition with a non-UI service already available,
- will not impair, in quality or quantity, the performance of my regular duties at UI,
- · does not constitute a conflict of interest, and
- is not contrary to UI's best interests.

| I affirm that I will inform each client that I am acting in a private capacity and the UI is not a party to my |
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| professional consulting activity and is not liable or responsible for the performance thereof. I affirm that I will |
| submit an annual report documenting the subject of and time spent on consulting activities to my unit |
| administrator and dean as required by <i>FSH</i> 3260 and 6240. |

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|--|------|---|--|--|
| Applicant's Signature | Date | Approval – Department Head /Supervisor Date | | |