

# OKLAHOMA STATE UNIVERSITY

## Notice of Intent to Engage in a Professional Activity for Extra Compensation

Date

Name:

I intend to engage in a professional activity for extra compensation under the following conditions:

University Function

External Organization

1. Name and address of contracting organization:

2. Beginning date of activity:

3. Termination date: \*

4. Time requirements:

a. On average, how many hours per week will be devoted to this activity:

b. What classes, meetings, or other University duties will be missed:

c. What arrangements have been made to cover any such duties missed?

5. Nature of Professional Activity:

Performance of the above described activity is consistent with the OSU Board of Regents approved "Guidelines to Govern Overload Assignments, Outside Professional Activities and Other Outside Activities of Faculty Members." (Policy and Procedures Letters 2-0111)

\_\_\_\_\_  
Signature

---

### ADMINISTRATIVE ACTION OF NOTICE OF INTENT

Reviewed; activity determined to be consistent with University policy.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean

Approval is granted for each activity for no more than one year at a time unless an exception is approved by the Provost & Senior Vice President or, in the General Administration, by the President.

cc: Department Head

Dean

Applicant