REQUEST TO ENGAGE IN CONSULTING SERVICES BY
UNIVERSITY OF GEORGIA COLLEGE OF VETERINARY MEDICINE PERSONNEL

The Regents' policy on consulting services by faculty to individuals, firms, or agencies outside the University is interpreted as being positive and beneficial to the University and the College. All consulting activities, including local, state, national and international, must have prior written approval by the department head of the faculty member initiating the request and the dean. The department head is to determine and sign-off that the consulting activity does not pose a conflict of interest and is consistent with the role and responsibility of the faculty member and the college. Faculty will accrue two consulting days per month and unused days may accumulate to a maximum of four days per month. The maximum number of consulting days permissible for a member of the faculty on full-time appointment (without using annual leave) is four days per month or the number of accrued days, whichever is less. Any consulting days exceeding these limits must be taken as annual leave. The department head will not approve a request if 1) the activity diminishes the faculty member's overall performance in his or her expected responsibilities, 2) the consulting activity places an undue burden on other faculty members to assume responsibilities in the faculty member's absence, or 3) if, in the opinion of the department head, the combination of time taken for consulting together with other travel authorizations, but excluding annual leave, exceeds that which is appropriate for a faculty member at the University of Georgia. Once the department head has confirmed that all the guidelines in this policy have been met, he or she will sign the request with that assurance and forward to the dean for final approval. See the College of Veterinary Medicine Faculty Consulting Policy for all other guidelines.

Explain the activity to be performed, name of agency, firm, or program, where the activity will be undertaken and how the activity will provide experience and knowledge useful for you in teaching, research, service, or administration:

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____________________________________________________________________________________

Explain how this activity is not in conflict of interest with services offered by the College.

____________________________________________________________________________________
____________________________________________________________________________________

Name of individual(s) who will cover your University or College commitments in your absence.

____________________________________________________________________________________

Consultant must fill out a leave form that indicates each specific day away from the College for consultative purposes. Free time (weekends), annual leave or consultation time may be used. How much time (hours per month) will be devoted to this consultation? ____________________________.

Dates of service: From ____________________________ to ____________________________.

Will University resources, including personnel, facilities, supplies or equipment be used? Yes __ No __
If yes, describe arrangements as to how UGA is to be reimbursed for University resources used and attach documentation of approval for off campus use of equipment.

____________________________________________________________________________________
____________________________________________________________________________________

Name of applicant (typed or printed) Date Applicant signature Department

Department Head Signature Date Dean Signature Date

Revised 06/22/2011