Conflict of Interest Agreement for VT Employees Pursuing Graduate Degrees

# Name VT ID

# VT Email Date

## VT Employment: Job Title

## Department/Unit

**Graduate Degree Program** (type of degree & program name)

**Append a Plan of Study including the name of the Advisor and the other Advisory Committee Members.** (Employment supervisors will abstain from chairing or serving on the candidate's graduate thesis/dissertation advisory committee).

**If seeking a doctoral degree on a part-time basis, indicate how the residency requirement will be met.** (“Residency” here does not refer to your workplace location, home address, or state of residence, but rather your opportunity to engage in the academic environment afforded by presence on a campus. See details in Graduate Catalog under [Residency Requirements for Doctoral Degrees](http://graduateschool.vt.edu/graduate_catalog/policies.htm?policy=002d14432c654287012c6542e363000c).)

**Summarize thesis/dissertation research plans, identify potential conflicts of interest, and indicate how the potential conflicts will be avoided. Explain how the research is separate from employment duties, such that there will be no perceived or actual Conflict of Interest/Conflict of Commitment between the employment and the graduate degree.** (Department or IT staff should not access confidential student records while engaging in their graduate student role. Identify alternative arrangements to be made if the applicant’s current duties include accessing student records.)

The undersigned agree that the Plan of Study, Advisory Committee composition, proposed research, and employment duties will avoid any potential Conflict of Interest/Conflict of Commitment between the graduate degree work and the employment.

**Employee/graduate student**

##  Signature:

## Employment Supervisor

#  Signature: Email:

#  Printed Name: Date:

**Department Head (employment)**

#  Signature: Email:

#  Printed Name: Date:

**Graduate Advisor**

#  Signature: Email:

#  Printed Name: Date:

# Department Head (graduate department, if different from employment department)

#  Signature: Email:

#  Printed Name: Date:

# Graduate School Approval

#  Signature: Email:

#  Printed Name: Date: