

New Jersey State Ethics Commission Outside Activity Questionnaire (OAQ)

Name: _____ NJIT Job Title: _____
Department: _____ NJIT Office Location: _____
NJIT Email Address: _____ Office Telephone: _____

As State employees, NJIT employees are required to file an OAQ at the start of their employment and thereafter update at least every three years. NJIT employees must obtain approval from their supervisor and the Ethics Liaison Officer prior to engaging in any outside employment or activity, such as (1) any business, trade, profession or other compensated employment; (2) uncompensated or volunteer work; or (3) holding office or title in the governing or advisory board of any entity.

Per state ethics regulations, outside activity (including employment and/or volunteer activity) may not be performed using NJIT time, resources, confidential information, and/or personnel.

Outside Employment/Activity

1. Are you currently engaged in, or planning to engage in, any business, trade, profession and/or part-time or full-time employment, paid or unpaid, outside of or in addition to your NJIT employment?

Yes No

If you answered yes to question 1 above, you must answer the following questions.

If you answered no to question 1 above, please skip to question 6.

2. Name of outside employer(s) or business(es).

Please indicate if you are an owner, partner, or corporate officer.

Address of outside employer or business:

Type of business:

Description of your responsibilities for outside employer or business:

Specific days worked per week:

Work hours:

3. Is your current or proposed outside employment or business being performed for or with any other employee(s) or official(s) of NJIT?

Yes No

If yes, name and title of employee(s) or official(s):

Do you have a supervisor-subordinate relationship with this person(s)?

Yes

No

If yes, explain:

4. Does or will your outside employment or business require/cause you to have contacts with any NJ State agencies, vendors, consultants or casino license holders?

Yes

No

If yes, explain, providing name of the agency, vendor, consultant or casino license holder you will have contacts with, and the nature of those contacts.

5. In your current or proposed outside employment or business do you or will you contract with or receive compensation from any New Jersey State agency?

Yes

No

If yes, indicate name of State agency and attach a copy of the contract. If no contract exists, provide a description of your business arrangement with the State agency.

If you have a contract with the State, did you receive the approval of the State Ethics Commission prior to entering into the contract?

Yes

No

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6. Do you hold a license issued by a New Jersey State agency that entitles you to engage in a particular business profession, trade or occupation?

Yes

No

If yes, type of license, permit, registration, certification, certificate or commission.

When was the license, permit, registration, certification, certificate or commission issued?

Is the license, permit, registration, certification, certificate or commission active?

7. Do you currently hold, or plan to hold, any outside voluntary position(s)?

Yes

No

If yes, explain.

Does this position require you to have contacts with any New Jersey State agency?

Yes

No

If yes, explain.

8. Are you an officer in any professional, trade, business or other organization? Yes No

If yes, explain.

9. Are you serving in any public office, or considering appointment or election to any public office? Yes No

If yes, what is the position and where is it located?

What are the duties of the position?

Hours engaged in the elective/appointive office?

10. Do you have an ownership interest in any partnership, corporation, professional service corporation, or any other firm or entity that is (a) performing any service for a New Jersey State agency, (b) directly or indirectly receiving funding from a New Jersey State agency, or (c) regulated by a New Jersey State agency? Yes No

If yes, for each indicate the following:

Name of employer, partnership, corporation or other entity in which you hold an ownership interest.

When was the license, permit, registration, certification, certificate or commission issued?

Identity of the State agency(ies) with which the entity does business, receives funding, or is regulated.

11. Are you or any members of your immediate family employed by a New Jersey casino licensee or applicant for a N.J. casino license? "Immediate family means a spouse, child, parent, or sibling residing in your household". Yes No

Family Member's name:

Relationship:

Name of Casino:

Position Held:

Please provide your supervisor's name below so that we may forward your form for review and approval:

Supervisor's name

I certify that this questionnaire contains no willful misstatement of fact or omission of a material fact. I understand that should my State employment and/or outside activity change, I am required to promptly submit a new Outside Activity Questionnaire. The State Ethics Commission requires employees to sign the OAQ and submit to their supervisor for review and approval. In an effort to keep this process "paper free", please choose one of the following methods for filing your disclosure form: (1) use your digital signature and return digitally signed form to ethics@njit.edu or (2) save form as a PDF and return by email to ethics@njit.edu (your email will suffice as proof of signature).

Signature of Employee

Date

Supervisor's approval/disapproval and date of decision:

Decision of Ethics Liaison Officer:	Approved	Approved with condition (attached)	Disapproved
Signature:	Date:		

Notification of decision was provided to employee:

Signature

Date

*NOTE: Under the Uniform Ethics Code ("UEC") a State Employee may appeal an agency Ethics Liaison Officer's decision to disapprove an outside activity. An appeal must be submitted in writing to the State Ethics Commission within 60 days of the employee's receipt of the agency's decision. For more information on appeals, see UEC Section VI.