



B. Honoraria, Academic Prizes or Other Things of Value

Date Received	Type of Benefit	Amount of Benefit	Source	Interested Party *

\*Indicate whether the source of the benefit is an interested party to William Paterson University.

“Interested party” means: 1) any person or entity the University regulates, licenses or supervises; 2) any grantee or grantor to the University and any employee, representative or agent thereof; 3) any supplier/vendor to the University; 4) any advocacy group that advocates or represents the positions of its members to your institution; 5) any organization a majority of whose members fall under 1-4 above.

C. Assigned Educational Texts or Materials

1. Do you assign educational books or materials authored by you as a course requirement?  
Yes \_\_\_\_\_ No \_\_\_\_\_
2. If answer to question 1 is yes, do you receive royalties from those educational materials?  
Yes \_\_\_\_\_ No \_\_\_\_\_
3. If “Yes”, please indicate the actual/estimated royalties along with the name of the non-profit organization to whom these royalties will be donated.

Value of Royalties \$ \_\_\_\_\_ Non-Profit recipient of donation: \_\_\_\_\_

I certify that the information on this form, to the best of my knowledge and belief, is true and accurate.

SIGNATURE OF EMPLOYEE \_\_\_\_\_ Date \_\_\_\_\_

I have reviewed the information contained on this form.

DEPARTMENT HEAD \_\_\_\_\_ Date \_\_\_\_\_

ETHICS LIAISON OFFICER \_\_\_\_\_ Date \_\_\_\_\_

**This form is an additional requirement for State employees acting in a scholarly capacity. It does not replace or supercede requirements to complete other disclosure forms mandated by the State Ethics Commission and/or University policies such as the Outside Activities Questionnaire Form, Travel Form, and Request for Approval for Attendance at Events.**

Please return completed forms to: Ethics Liaison Officer  
Office of Human Resources, College Hall Room 150  
Fax: 973-720-2090