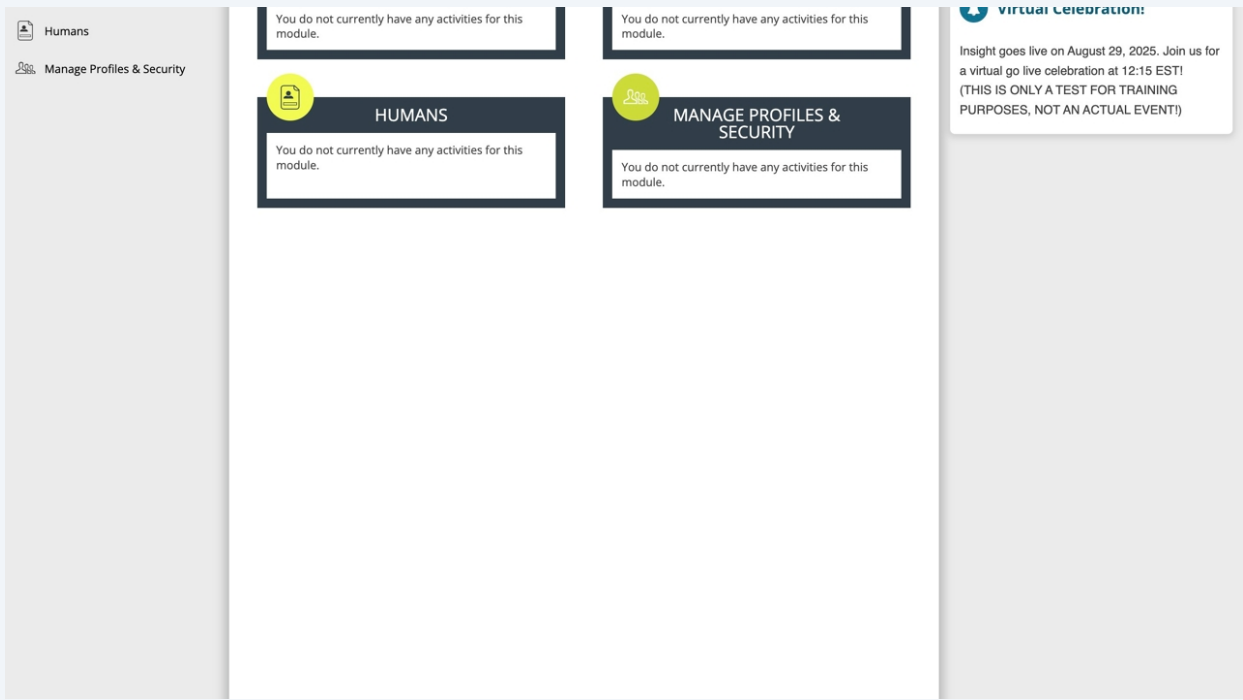


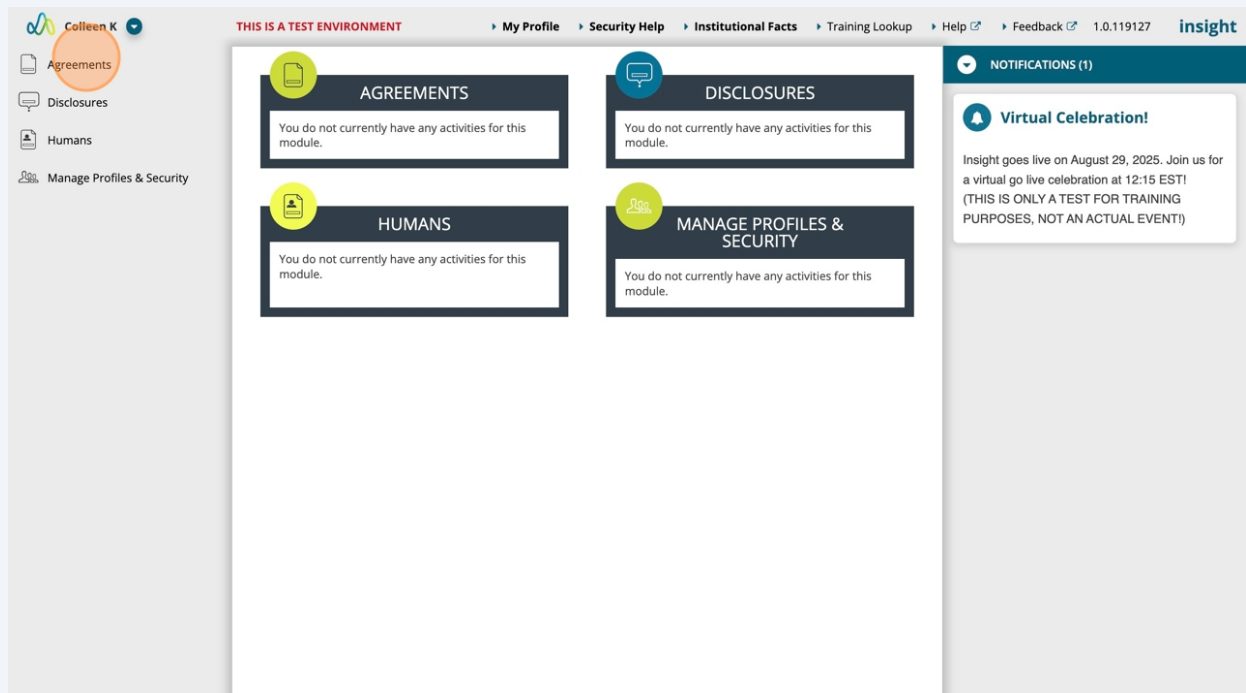
INSIGHT: Create an External Activity Agreement Record

1

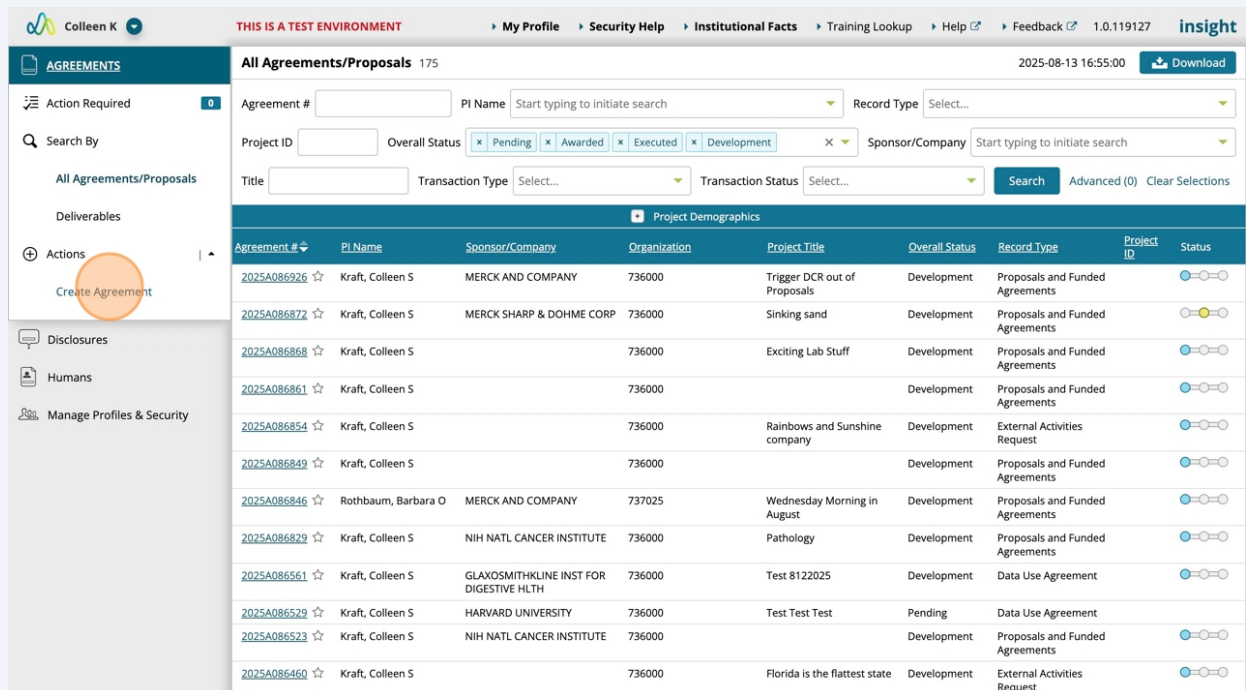
Navigate to <https://marietta-emory.researchinsight.org/agreements/agreements>



2 Click "Agreements"



3 Click "Create Agreement"



4 Click the "Yes, I am submitting a record related to external activities" field.

The screenshot shows the 'Create Agreement' form with a sidebar on the left containing 'Deliverables', 'Actions' (with a '+' icon and 'Create Agreement' link), 'Disclosures', 'Humans', and 'Manage Profiles & Security'. The main content area is divided into six colored sections: 'Proposals and Funded Agreements' (light blue), 'Material Transfer Agreements' (medium blue), 'Data Use Agreement' (purple), 'Confidential Disclosure Agreements' (orange), 'External Activities' (pink), and 'Collaborative Research Agreement (No external funding)' (grey). Each section contains a question and two radio button options. The 'External Activities' section is highlighted with an orange circle around the 'Yes, I am submitting a record related to external activities' radio button. Below the sections is a note: 'Note: if you are attempting to submit to procurement, please contact the procurement office for your agreement submission.'

5 Click the "Who is the Emory Principal Investigator (PI) for this agreement? Please enter "last name, first name" to search *" field.

The screenshot shows the 'Create Agreement' form with the same sidebar as above. The 'External Activities' section is now selected, and the 'Yes, I am submitting a record related to external activities' radio button is checked. Below the sections is a new section titled 'Who is the Emory Principal Investigator (PI) for this agreement? Please enter "last name, first name" to search *'. It contains a search input field with the placeholder text 'Start typing to initiate search'. Below this is a dropdown menu labeled 'Please confirm the correct organization/department for this record' with the text 'Select...'. At the bottom right, there are three buttons: 'Cancel', 'SAVE', and 'CREATE'. A note at the bottom reads: 'Note: if you are attempting to submit to procurement, please contact the procurement office for your agreement submission.'

6 Click "Create"

Are you submitting an application for a grant, contract, or cooperative agreement?

☐ Yes, I am submitting an application for a grant, contract, or cooperative agreement

Are you submitting an agreement related to the transfer of materials or materials and data to or from an external company or institution?

☐ Yes, I am submitting an agreement related to the transfer of materials or materials and data.

Are you submitting an agreement related to the use of incoming or outgoing data?

☐ Yes, I am submitting an agreement related to the use of incoming or outgoing data

Confidential Disclosure Agreements

Are you submitting an agreement related to the protection of confidential information?

☐ Yes, I am submitting an agreement related to the protection of confidential information

External Activities

Are you submitting a record related to external activities?

☒ Yes, I am submitting a record related to external activities

Collaborative Research Agreement (No external funding)

Are you submitting a collaborative research agreement with no funding?

☐ Yes, I am submitting a collaborative research agreement with no funding

Who is the Emory Principal Investigator (PI) for this agreement? Please enter "last name, first name" to search

Kraft, Colleen S (P1257710) x

Please confirm the correct organization/department for this record

SOM: Medicine: Infectious Dis 733025 Emory University x

Note: if you are attempting to submit to procurement, please contact the procurement office for your agreement submission.

Cancel SAVE CREATE

7 Click the "Enter a title" field.

Colleen K THIS IS A TEST ENVIRONMENT My Profile Security Help Institutional Facts Training Lookup Help Feedback 1.0.119127 insight

AGREEMENTS

Action Required 0

Search By

All Agreements/Proposals

Deliverables

2025A086927 IR

Project Information

Related Records 0

Agreement Details

External Entity

External Activities

Staff

Attachments

Deliverables

Summary Notes

Actions

Disclosures

Humans

Manage Profiles & Security

Kraft

IR Draft v0.1

PI: Kraft, Colleen S (P1257710)

Institution: Emory University

Organization: 733025

OII Contact: example@example-researc...

OII Entity:

Status: Development

Agreement #: 2025A086927

Record Type: External Activities Request

Legacy #:

Agreement Details

Please confirm the correct organization/department for this record

SOM: Medicine: Infectious Dis 733025 Emory University x

Enter a title

Close panel

Draft (1)

2025

Initial Review (IR) Draft Created: 08/13/25 Updated: 08/13/25

Activity: Submit

Instructions

Submission Checklist

Enter a title

Workflow History

08/13/25 - 08:09 PM - Kraft, Colleen S Draft

Notes

8 Click "Next >"

The screenshot shows the 'IR Draft v0.1' form for 'Rainbows and Sunshine'. The left sidebar contains a navigation menu with items like 'Project Information', 'Related Records', 'Agreement Details', 'External Entity', 'External Activities', 'Staff', 'Attachments', 'Deliverables', 'Summary Notes', 'Actions', 'Disclosures', 'Humans', and 'Manage Profiles & Security'. The main content area has a header 'Please confirm the correct organization/department for this record' with a dropdown menu showing 'SOM: Medicine: Infectious Dis 733025 Emory University'. Below this is a text input field for 'Enter a title' with the value 'Rainbows and Sunshine'. The right sidebar contains 'Instructions', 'Submission Checklist' (with a note 'All validations in this area have been completed'), 'Workflow History' (showing '08/13/25 - 08:09 PM - Kraft, Colleen S Draft'), and 'Notes'. At the bottom right, there is a 'Submit Actions' section with a checkbox 'I have carefully reviewed this record and confirm my sign off' and three buttons: 'SAVE', 'WITHDRAW', and 'SUBMIT'. The 'Next >' button is highlighted with an orange circle.

9 Click "American Society For Microbiol"

The screenshot shows the 'IR Draft v0.1' form for 'Rainbows and Sunshine'. The left sidebar is the same as in the previous screenshot. The main content area has a header 'Kraft Rainbows and Sunshine' with a 'Close panel' button. Below this is a section for 'Draft v0.1' with fields for 'PI: Kraft, Colleen S (P1257710)', 'OII Entity: Status: Development', 'Agreement #: 2025A086927', 'Record Type: External Activities Request', and 'Legacy #:'. Below this is a section for 'External Entity' with a 'Create a New External Entity' link. A dropdown menu is open, showing a list of entities: 'American Society For Clinical', 'American Society For Gastroint', 'American Society For Gastrontr', 'American Society For Microbiol' (highlighted with an orange circle), 'American Society For Radiation', 'American Society For Reconstru', and 'American Society For Reproduct'. The right sidebar is the same as in the previous screenshot.

10 Click "Next >"

2025A086927 IR

Project Information | 0

Related Records

Agreement Details

External Entity

External Activities

Staff

Attachments

Deliverables

Summary Notes

Actions

Disclosures

Humans

Manage Profiles & Security

Entity Create a New External Entity

American Society For Microbiol

Instructions

Submission Checklist

All validations in this area have been completed

Workflow History

08/13/25 - 08:09 PM - Kraft, Colleen S
Draft

Notes

Submit Actions

I have carefully reviewed this record and confirm my sign off

SAVE WITHDRAW SUBMIT

< Previous Next >

11 Click the "Emory University" field.

IR Draft v0.1

PI: Kraft, Colleen S (P1257710) OII Entity: American Society For Microbiol Agreement #: 2025A086927

Institution: Emory University Status: Development Record Type: External Activities Request

Organization: 733025 Legacy #:

OII Contact: example@example-researc...

External Activities

Please answer the following questions about this activity and your role at Emory. After completing this questionnaire, upload a copy of the agreement and any other documents you received from the company on the Attachments page on the left.

*Note Emory refers to Emory University, Emory Healthcare, and its affiliate institutions including the Pediatric Institute and Children's Healthcare of Atlanta.

If multiple Emory person are involved in this activity, each personnel must submit a separate External Activity Request.

Are you an Emory University or Emory Healthcare employee? *

☐ Emory University ☐ Emory Healthcare

Are you faculty or staff? *

☐ Faculty ☐ Staff

Are you engaged in research? *

☐ Yes, I am engaged in research ☐ No, I am not engaged in research

Select all activities you are seeking to engage under this request: *

☐ Consulting

☐ Service on board, committee, or in a fiduciary role

☐ Expert witness/legal consultation

☐ Appointment at another institution

☐ Publishing, editing, and/or authoring

☐ Speaking or training

☐ Startup company

Draft (1)

2025

Initial Review (IR) Draft Created: 08/13/25 Updated: 08/13/25

Activity: Submit

Instructions

Submission Checklist

- Indicate if you are an Emory University or Healthcare employee.
- Indicate if you are faculty.
- Indicate if you are engaged in research.
- Indicate the services you will provide under the agreement
- Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
- Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
- Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
- Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
- Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
- Please indicate if you supervise any individual who is participating in any research sponsored

Submit Actions

I have carefully reviewed this record and confirm my sign off

SAVE WITHDRAW SUBMIT

< Previous Next >

12 Click the "Faculty" field.

<div>Search By</div> <div>All Agreements/Proposals</div> <div>Deliverables</div> <div>2025A086927 IR</div> <div>Project Information</div> <div>Related Records</div> <div>Agreement Details</div> <div>External Entity</div> <div>External Activities</div> <div>Staff</div> <div>Attachments</div> <div>Deliverables</div> <div>Summary Notes</div> <div>Actions</div> <div>Disclosures</div> <div>Humans</div> <div>Manage Profiles & Security</div>	<div>Institution: Emory University Status: Development Record Type: External Activities Request</div> <div>Organization: 733025 Legacy #:</div> <div>OII Contact: example@example-researc...</div> <div>External Activities</div> <div>Please answer the following questions about this activity and your role at Emory. After completing this questionnaire, upload a copy of the agreement and any other documents you received from the company on the Attachments page on the left.</div> <div>*Note Emory refers to Emory University, Emory Healthcare, and its affiliate institutions including the Pediatric Institute and Children's Healthcare of Atlanta.</div> <div>If multiple Emory person are involved in this activity, each personnel must submit a separate External Activity Request.</div> <div>Are you an Emory University or Emory Healthcare employee? *</div> <div><input checked="" type="radio"/> Emory University <input type="radio"/> Emory Healthcare</div> <div>Are you faculty or staff? *</div> <div><input type="radio"/> Faculty <input type="radio"/> Staff</div> <div>Are you engaged in research? *</div> <div><input type="radio"/> Yes, I am engaged in research <input type="radio"/> No, I am not engaged in research</div> <div>Select all activities you are seeking to engage under this request: *</div> <div><input type="checkbox"/> Consulting</div> <div><input type="checkbox"/> Service on board, committee, or in a fiduciary role</div> <div><input type="checkbox"/> Expert witness/legal consultation</div> <div><input type="checkbox"/> Appointment at another institution</div> <div><input type="checkbox"/> Publishing, editing, and/or authoring</div> <div><input type="checkbox"/> Speaking or training</div> <div><input type="checkbox"/> Startup company</div> <div><input type="checkbox"/> Employment (full time, part time, self-employment)</div> <div><input type="checkbox"/> Purchase of stock related to Emory position</div> <div><input type="checkbox"/> Spouse/dependent children related conflicts</div>	<div>Initial Review (IR) Draft Created: 08/13/25 Updated: 08/13/25</div> <div>Activity: Submit</div> <div>Instructions</div> <div>Submission Checklist</div> <div><ul style="list-style-type: none">Indicate if you are faculty.Indicate if you are engaged in research.Indicate the services you will provide under the agreementIndicate if this project make more than minimal use of institutional resources, such as space, materials, dataPlease indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.Please indicate how you will be compensated.Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.Please indicate if you are participating in any research that uses technology owned/licensed by the entity.Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.Please indicate if you supervise any individual who is Participating in any research sponsored by the Outside Entity.Indicate if you are involved in supervising or</div> <div>Submit Actions</div>
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13 Click the "Yes, I am engaged in research" field.

<div>Deliverables</div> <div>2025A086927 IR</div> <div>Project Information</div> <div>Related Records</div> <div>Agreement Details</div> <div>External Entity</div> <div>External Activities</div> <div>Staff</div> <div>Attachments</div> <div>Deliverables</div> <div>Summary Notes</div> <div>Actions</div> <div>Disclosures</div> <div>Humans</div> <div>Manage Profiles & Security</div>	<div>External Activities</div> <div>Please answer the following questions about this activity and your role at Emory. After completing this questionnaire, upload a copy of the agreement and any other documents you received from the company on the Attachments page on the left.</div> <div>*Note Emory refers to Emory University, Emory Healthcare, and its affiliate institutions including the Pediatric Institute and Children's Healthcare of Atlanta.</div> <div>If multiple Emory person are involved in this activity, each personnel must submit a separate External Activity Request.</div> <div>Are you an Emory University or Emory Healthcare employee? *</div> <div><input checked="" type="radio"/> Emory University <input type="radio"/> Emory Healthcare</div> <div>Are you faculty or staff? *</div> <div><input checked="" type="radio"/> Faculty <input type="radio"/> Staff</div> <div>Are you engaged in research? *</div> <div><input type="radio"/> Yes, I am engaged in research <input type="radio"/> No, I am not engaged in research</div> <div>Select all activities you are seeking to engage under this request: *</div> <div><input type="checkbox"/> Consulting</div> <div><input type="checkbox"/> Service on board, committee, or in a fiduciary role</div> <div><input type="checkbox"/> Expert witness/legal consultation</div> <div><input type="checkbox"/> Appointment at another institution</div> <div><input type="checkbox"/> Publishing, editing, and/or authoring</div> <div><input type="checkbox"/> Speaking or training</div> <div><input type="checkbox"/> Startup company</div> <div><input type="checkbox"/> Employment (full time, part time, self-employment)</div> <div><input type="checkbox"/> Purchase of stock related to Emory position</div> <div><input type="checkbox"/> Spouse/dependent children related conflicts</div> <div><input type="checkbox"/> IP compensation outside of Emory</div>	<div>Activity: Submit</div> <div>Instructions</div> <div>Submission Checklist</div> <div><ul style="list-style-type: none">Indicate if you are engaged in research.Indicate the services you will provide under the agreementIndicate if this project make more than minimal use of institutional resources, such as space, materials, dataPlease indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.Please indicate how you will be compensated.Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.Please indicate if you are participating in any research that uses technology owned/licensed by the entity.Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.Please indicate if you supervise any individual who is Participating in any research sponsored by the Outside Entity.Indicate if you are involved in supervising or providing any non-research services between</div> <div>Submit Actions</div> <div><input type="checkbox"/> I have carefully reviewed this record and confirm my sign off</div>
--	--	--

14 Click this icon.

2025A086927

IR

Project Information

Related Records

Agreement Details

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Disclosures

Humans

Manage Profiles & Security

☐ Other monetary compensation

Provide brief description of the activity (e.g., scope of work, any technology, research involved, etc.). *


TBD

Please upload of any applicable agreements or other supporting documents here:


+ Drag & Drop files here or select files from computer

Type	File Name	Description	Modified	By
The search criteria yielded no results.				

Please indicate the start date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. *



Please indicate the end date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. *



Please provide the number of days per year you will be engaged in this activity: *

Please indicate the expected daily hours commitment of the activity.

Please indicate the expected weekly hours commitment of the activity.

< Previous

Next >

Instructions

Submission Checklist

- Briefly describe the activity.
- Please indicate the start date for the agreement.
- Activity end date cannot be before start date
- Provide number of days you will be engaged in this activity.
- Please indicate the expected daily hours comm
- Please indicate the expected daily hours commitment of the activity.
- Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
- Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
- Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
- Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
- Please indicate if you are now participating in

Submit Actions

☐ I have carefully reviewed this record and confirm my sign off

SAVE

WITHDRAW

SUBMIT

15 Click the "Service on board, committee, or in a fiduciary role" field.

Search By

All Agreements/Proposals

Deliverables

2025A086927

IR

Project Information

Related Records

Agreement Details

External Entity

External Activities

Staff

Attachments

Deliverables

Summary Notes

Actions

Disclosures

Humans

Manage Profiles & Security

Institution: Emory University Status: Development Record Type: External Activities Request
 Organization: 733025 Legacy #:
 OII Contact: example@example-researc...

External Activities

Are you an Emory University or Emory Healthcare employee? *

☒ Emory University ☐ Emory Healthcare

Are you faculty or staff? *

☒ Faculty ☐ Staff

Are you engaged in research? *

☒ Yes, I am engaged in research ☐ No, I am not engaged in research

Select all activities you are seeking to engage under this request: *

☐ Consulting
☐ Service on board, committee, or in a fiduciary role
☐ Expert witness/legal consultation
☐ Appointment at another institution
☐ Publishing, editing, and/or authoring
☐ Speaking or training
☐ Startup company
☐ Employment (full time, part time, self-employment)
☐ Purchase of stock related to Emory position
☐ Spouse/dependent children related conflicts
☐ IP compensation outside of Emory
☐ Other monetary compensation

Do you anticipate using any Emory resources in this activity (e.g., space, materials, data, personnel)? *

☐ Yes ☐ No

Is this entity in the process of licensing intellectual property (IP) that you invented or that is used in, or is the subject of, your Emory

Initial Review (IR) Draft Created: 08/13/25 Updated: 08/13/25

Activity: Submit

Instructions

Submission Checklist

- Indicate the services you will provide under the agreement
- Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
- Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
- Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
- Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
- Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
- Please indicate if you supervise any individual who is Participating in any research sponsored by the Outside Entity.
- Indicate if you are involved in supervising or providing any non-research services between the Outside Entity and your MGB institution in

Submit Actions

Click the "Provide brief description of the activity (e.g., scope of work, any technology, research involved, etc.). **" field.

Instructions

Submission Checklist

- Activity end date cannot be before start date
- Provide number of days you will be engaged in this activity.
- Please indicate the expected daily house comm
- Please indicate the expected daily hours commitment of the activity.
- Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
- Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
- Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
- Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
- Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
- Please indicate if you supervise any individual

Submit Actions

☐ I have carefully reviewed this record and confirm my sign off

SAVE WITHDRAW SUBMIT

Click this icon.

Draft	
2025	
Initial Review (IR)	Draft Created: 08/13/25 Updated: 08/13/25
Activity: Submit	
▶ Instructions	
Submission Checklist	
<ul style="list-style-type: none"> • Activity end date cannot be before start date • Provide number of days you will be engaged in this activity. • Please indicate the expected daily house comm • Please indicate the expected daily hours commitment of the activity. • Indicate if this project make more than minimal use of institutional resources, such as space, materials, data • Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates. • Please indicate how you will be compensated. • Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity. • Please indicate if you are participating in any research that uses technology owned/licensed by the entity. • Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity. • Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity. • Please indicate if you supervise any individual 	
Submit Actions	

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Click the "Please indicate the end date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. **" field.

All Agreements/Proposals
Deliverables
2025A086927 IR
Project Information
Related Records
Agreement Details
External Entity
External Activities
Staff
Attachments
Deliverables
Summary Notes
Actions
Disclosures
Humans
Manage Profiles & Security

Oil Contact: example@example-researc...
External Activities
Please upload of any applicable agreements or other supporting documents here:
+ Drag & Drop files here or select files from computer

Type	File Name	Description	Modified	By
The search criteria yielded no results.				

Please indicate the start date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. *
07/01/2025
Please indicate the end date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. *
October 2026
Please provide the number of days per year you will be engaged in this activity: *
Please indicate the expected daily hours commitment of the activity.
Please indicate the expected weekly hours commitment of the activity.
Do you anticipate using any Emory resources in this activity (e.g., space, materials, data, personnel)? *
Yes No
Is this entity in the process of licensing intellectual property (IP) that you invented or that is used in, or is the subject of, your Emory research? *
Yes No I don't know

Initial Review (IR) **Draft** Updated: 08/13/25
Activity: Submit
Instructions
Submission Checklist
• Activity end date cannot be before start date
• Provide number of days you will be engaged in this activity.
• Please indicate the expected daily hours commitment of the activity.
• Please indicate the expected daily hours commitment of the activity.
• Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
• Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
• Please indicate how you will be compensated.
• Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
• Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
• Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
• Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
• Please indicate if you supervise any individual
Submit Actions
I have carefully reviewed this record and confirm my sign off

19

Click the "Please indicate the expected daily hours commitment of the activity.*" field.

2025A086927 IR
Project Information
Related Records
Agreement Details
External Entity
External Activities
Staff
Attachments
Deliverables
Summary Notes
Actions
Disclosures
Humans
Manage Profiles & Security

Please upload of any applicable agreements or other supporting documents here:
+ Drag & Drop files here or select files from computer

Type	File Name	Description	Modified	By
The search criteria yielded no results.				

Please indicate the start date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. *
07/01/2025
Please indicate the end date for the services/activity you will provide. If you don't know an exact date, provide an estimated date. *
06/20/2027
Please provide the number of days per year you will be engaged in this activity: *
7
Please indicate the expected daily hours commitment of the activity.
Please indicate the expected weekly hours commitment of the activity.
Do you anticipate using any Emory resources in this activity (e.g., space, materials, data, personnel)? *
Yes No
Is this entity in the process of licensing intellectual property (IP) that you invented or that is used in, or is the subject of, your Emory research? *
Yes No I don't know
< Previous Next >

Instructions
Submission Checklist
• Activity end date cannot be before start date
• Please indicate the expected daily hours commitment of the activity.
• Please indicate the expected daily hours commitment of the activity.
• Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
• Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
• Please indicate how you will be compensated.
• Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
• Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
• Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
• Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
• Please indicate if you supervise any individual who is Participating in any research sponsored by the Outside Entity.
Submit Actions
I have carefully reviewed this record and confirm my sign off
SAVE WITHDRAW SUBMIT

Click the "Please indicate the expected weekly hours commitment of the activity.*" field.

Instructions

Submission Checklist

- Activity end date cannot be before start date
- Please indicate the expected daily house comm
- Please indicate the expected daily hours commitment of the activity.
- Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
- Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
- Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
- Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
- Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
- Please indicate if you supervise any individual who is Participating in any research sponsored by the Outside Entity.

Submit Actions

☐ I have carefully reviewed this record and confirm my sign off

SAVE WITHDRAW SUBMIT

Click the "No" field.

Instructions

Submission Checklist

- Activity end date cannot be before start date
- Please indicate the expected daily house comm
- Indicate if this project make more than minimal use of institutional resources, such as space, materials, data
- Please indicate if the Outside Entity licensed or is in the process of licensing from Emory or any of its affiliates.
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
- Please indicate if you are participating in any research that uses technology owned/licensed by the entity.
- Please indicate if you expect within the next 12 months to be participating in any research sponsored by the Outside Entity.
- Please indicate if you are now participating in any research that is related to or competing with research interests of the Outside Entity.
- Please indicate if you supervise any individual who is Participating in any research sponsored by the Outside Entity.
- Indicate if you are involved in supervising or providing any non-research services between

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☐ I have carefully reviewed this record and confirm my sign off

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22 Click the "No" field.

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Oil Contact: example@example-researc...

External Activities

7

Please indicate the expected daily hours commitment of the activity.

Please indicate the expected weekly hours commitment of the activity.

1 hours

Do you anticipate using any Emory resources in this activity (e.g., space, materials, data, personnel)? *

☐ Yes ☒ No

Is this entity in the process of licensing intellectual property (IP) that you invented or that is used in, or is the subject of, your Emory research? *

☐ Yes ☒ No ☐ I don't know

How will you be compensated for this activity? *

☐ Monetary ☐ Equity ☐ Travel ☐ In-kind support (e.g. datasets, reagents, drugs, devices, etc)

☐ Other compensation ☐ I will not be compensated for this activity

Do you, your spouse, dependent children, or other members of your household have an existing financial relationship with this entity (e.g., employment, stocks, equity, etc.)? *

☐ Yes ☐ No

Are you now, or do you anticipate, participating in research that uses or studies technology owned/licensed by the entity? *

☐ Yes ☐ No

Are you now, or do you anticipate, participating in any research sponsored by the entity? *

☐ Yes ☐ No

As part of this request, will you be engaging in research activities outside of Emory (e.g., the design, conduct, or reporting of the research)? *

Initial Review (IR) **Draft** Updated: 08/13/25

Activity: Submit

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- Activity end date cannot be before start date
- Please indicate the expected daily hours comm
- Please indicate how you will be compensated.
- Please indicate if you currently have other role(s) or Financial Interests in the Outside Entity.
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- Indicate if you are involved in supervising or providing any non-research services between the Outside Entity and your MGB institution in your MGB role.
- Please indicate if you prescribe products or

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I have carefully reviewed this record and confirm my sign off

23 Click the "Monetary" field.

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7

Please indicate the expected daily hours commitment of the activity.

Please indicate the expected weekly hours commitment of the activity.

1 hours

Do you anticipate using any Emory resources in this activity (e.g., space, materials, data, personnel)? *

☐ Yes ☒ No

Is this entity in the process of licensing intellectual property (IP) that you invented or that is used in, or is the subject of, your Emory research? *

☐ Yes ☒ No ☐ I don't know

How will you be compensated for this activity? *

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☐ Yes ☐ No

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- Please indicate if you prescribe products or services of this entity.
- Please indicate if the scope of services under your personal arrangement with the Outside

Submit Actions

I have carefully reviewed this record and confirm my sign off

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Click the "What is your anticipated annual monetary compensation (dollars)? **" field.

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Please indicate the expected daily hours commitment of the activity.

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Do you anticipate using any Emory resources in this activity (e.g., space, materials, data, personnel)? *

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☐ Yes ☒ No ☐ I don't know

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☐ Yes ☒ No

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- Please indicate if the scope of services under

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Click "No"

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What is your anticipated annual monetary compensation (dollars)? *

\$30,000

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26 Click the "No" field.

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Please indicate the expected weekly hours commitment of the activity.

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☐

I have carefully reviewed this record and confirm my sign off

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☐

I have carefully reviewed this record and confirm my sign off

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28 Click the "No" field.

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research? *

☐ Yes ☒ No ☐ I don't know

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☐ I have carefully reviewed this record and confirm my sign off

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29 Click the "No" field.

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☐ Yes ☒ No ☐ I don't know

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☐ I have carefully reviewed this record and confirm my sign off

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☐ Yes ☒ No

Is this activity related to, or does it overlap with, your Emory institutional responsibilities? *

☐ Yes ☒ No

Are you, or will you be involved in, purchasing decisions between Emory or its affiliates and this entity? *

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Instructions

Submission Checklist

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Workflow History

08/13/25 - 08:09 PM - Kraft, Colleen S

Draft

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☐ I have carefully reviewed this record and confirm my sign off

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Workflow History

08/13/25 - 08:09 PM - Kraft, Colleen S

Draft

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☐ I have carefully reviewed this record and confirm my sign off

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Provide any additional details that should be considered in the review of this request:

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I have carefully reviewed this record and confirm my sign off

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Draft

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I have carefully reviewed this record and confirm my sign off

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34 Click "No"

The screenshot shows a research request form with a left sidebar, a central question area, and a right sidebar. The left sidebar contains a list of items: 2025A086927 (IR), Project Information, Related Records, Agreement Details, External Entity, External Activities, Staff, Attachments, Deliverables, Summary Notes, and Actions. The central area contains several questions with radio button options. The right sidebar contains instructions, a submission checklist, workflow history, and submit actions.

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Are you now, or do you anticipate, participating in any research sponsored by the entity? *

☐ Yes ☒ No

As part of this request, will you be engaging in research activities outside of Emory (e.g., the design, conduct, or reporting of the research)? *

☐ Yes ☒ No

Does this activity involve undergraduate, graduate students, postdoctoral fellows, or employees (including faculty) who you supervise at Emory? *

☐ Yes ☒ No

Do you currently provide any non-research services, between the outside entity and Emory (e.g., vendor relationship, negotiations)? *

☐ Yes ☒ No

Do you prescribe products or services of this entity? *

☐ Yes ☒ No

Is this activity related to, or does it overlap with, your Emory institutional responsibilities? *

☐ Yes ☒ No

Are you, or will you be involved in, purchasing decisions between Emory or its affiliates and this entity? *

☐ Yes ☒ No

Provide any additional details that should be considered in the review of this request:

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- Activity end date cannot be before start date
- Please indicate the expected daily hourse comm
- Please indicate if you participate in your institution's or MGB discussions, recommendations, or decisions regarding the purchase of goods or services from the Outside Entity.

Workflow History

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Submit Actions

I have carefully reviewed this record and confirm my sign off

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35 Click the "No" field.

This screenshot is identical to the one in step 34, showing the same research request form. The 'No' radio button for the question 'Are you, or will you be involved in, purchasing decisions between Emory or its affiliates and this entity? *' is highlighted with an orange circle, indicating the action to be taken.

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Are you now, or do you anticipate, participating in research that uses or studies technology owned/licensed by the entity? *

☐ Yes ☒ No

Are you now, or do you anticipate, participating in any research sponsored by the entity? *

☐ Yes ☒ No

As part of this request, will you be engaging in research activities outside of Emory (e.g., the design, conduct, or reporting of the research)? *

☐ Yes ☒ No

Does this activity involve undergraduate, graduate students, postdoctoral fellows, or employees (including faculty) who you supervise at Emory? *

☐ Yes ☒ No

Do you currently provide any non-research services, between the outside entity and Emory (e.g., vendor relationship, negotiations)? *

☐ Yes ☒ No

Do you prescribe products or services of this entity? *

☐ Yes ☒ No

Is this activity related to, or does it overlap with, your Emory institutional responsibilities? *

☐ Yes ☒ No

Are you, or will you be involved in, purchasing decisions between Emory or its affiliates and this entity? *

☐ Yes ☒ No

Provide any additional details that should be considered in the review of this request:

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37 Click the "I have carefully reviewed this record and confirm my sign off" field.

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Please answer the following questions about this activity and your role at Emory. After completing this questionnaire, upload a copy of the agreement and any other documents you received from the company on the Attachments page on the left.

***Note Emory refers to Emory University, Emory Healthcare, and its affiliate institutions including the Pediatric Institute and Children's Healthcare of Atlanta.**

If multiple Emory person are involved in this activity, each personnel must submit a separate External Activity Request.

Are you an Emory University or Emory Healthcare employee? *

☒ Emory University ☐ Emory Healthcare

Are you faculty or staff? *

☒ Faculty ☐ Staff

Are you engaged in research? *

☒ Yes, I am engaged in research ☐ No, I am not engaged in research

Select all activities you are seeking to engage under this request: *

☐ Consulting

☒ Service on board, committee, or in a fiduciary role

☐ Expert witness/legal consultation

☐ Appointment at another institution

☐ Publishing, editing, and/or authoring

☐ Speaking or training

☐ Startup company

☐ Employment (full time, part time, self-employment)

☐ Purchase of stock related to Emory position

☐ Spouse/dependent children related conflicts

☐ IP compensation outside of Emory

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Please answer the following questions about this activity and your role at Emory. After completing this questionnaire, upload a copy of the agreement and any other documents you received from the company on the Attachments page on the left.

***Note Emory refers to Emory University, Emory Healthcare, and its affiliate institutions including the Pediatric Institute and Children's Healthcare of Atlanta.**

If multiple Emory person are involved in this activity, each personnel must submit a separate External Activity Request.

Are you an Emory University or Emory Healthcare employee? *

☒ Emory University ☐ Emory Healthcare

Are you faculty or staff? *

☒ Faculty ☐ Staff

Are you engaged in research? *

☒ Yes, I am engaged in research ☐ No, I am not engaged in research

Select all activities you are seeking to engage under this request: *

☐ Consulting

☒ Service on board, committee, or in a fiduciary role

☐ Expert witness/legal consultation

☐ Appointment at another institution

☐ Publishing, editing, and/or authoring

☐ Speaking or training

☐ Startup company

☐ Employment (full time, part time, self-employment)

☐ Purchase of stock related to Emory position

☐ Spouse/dependent children related conflicts

☐ IP compensation outside of Emory

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