[date]

Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Executive Vice Chancellor for [Academic/Health] Affairs

The University of Texas System

601 Colorado Street

Austin, Texas 78701

RE: Plan to Manage Conflict of Interest

Dear Dr. \_\_\_\_\_\_\_\_\_:

Attached please find a “Plan to Manage Conflict of Interest for [name] with [company].”

The attached agreement has been approved in accordance with the Office of General Counsel's requirements. We request that you approve [name]’s holding equity in and service as a member of Licensee's Board of Directors [revise accordingly].

Sincerely,

President, [Name of Institution]

Enclosure: Plan to Manage Conflict of Interest

c: Interested Institutional Personnel

Inventor

BethLynn Maxwell (Office of General Counsel)

**Reviewed and approved:**

Office of General Counsel

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approved:**

Executive Vice Chancellor for [Academic/Health] Affairs

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_