



**OUTSIDE BUSINESS VENTURE
DISCLOSURE FORM**

Constellis Holdings, LLC and its subsidiaries and affiliates (the “Company”) require that any outside business ventures be approved in advance by your manager and then the Chief Legal Officer or his or her designee. Please complete this form and submit it to the legal department for written approval *prior to engaging in any outside business ventures*. If you are already engaged in any outside business ventures, please complete this form and submit it to the Legal Department immediately by sending to legalreviewrequest@constellis.com.

Please note that should any of your answers to this form change, you are obligated to notify the Legal Department. For instance, if you report that you are performing work for one line of business or entity and that changes, or you are contemplating engaging in a different business outside of the Company, please notify the Legal Department in order to seek authorization to proceed.

1. Employee name _____

Click here to enter text.

2. Employee title and department/contract

Click here to enter text.

3. Full legal name of outside business venture

Click here to enter text.

4. Address of the business

Click here to enter text.

5. Detailed description of the business

Click here to enter text.

6. Amount of hours per week of your time spend/will spend performing work for the business

Click here to enter text.

7. Number of employees you have, if any

[Click here to enter text.](#)

8. Days and times of the week that you spend working on this outside business, and whether those days/times are or will be during your Company working hours.

[Click here to enter text.](#)

9. Will use any Company resources in support of your business (including phone, email, and copier)? Yes No

If yes, please explain.

[Click here to enter text.](#)

10. Do you believe that your outside business poses a conflict of interest with your duties at the Company? Yes No

11. If no, state the reason why you do not believe that your outside business poses a conflict of interest.

[Click here to enter text.](#)

12. Will use the Company's name, image, or logo in any way in support of your business

Yes No

If yes, please explain.

[Click here to enter text.](#)

All employees: Please sign and date below.

I certify that the above is true and accurate to the best of my knowledge.

Signature

Date

Manager:

Approve Request: _____

Do Not Approve Request: _____

Signature

Date

Chief Legal Officer/Designee

Approve Request: _____

Do Not Approve Request: _____

Signature

Date