## Four-in-One Form



Read and complete each of the four sections of this form.	
NAME	
(First) (M.I.) (Last	
UFID	
Section 1—LOYALTY OATH	
I, the above-named citizen of the state of Florida and the United Sta University of Florida and a recipient of Public Funds as such emplo support the Constitution of the United States and of the state of Flor	ee or officer, do hereby solemnly swear or affirm that I will
SIGNED	DATE
State of Florida, County of	
The foregoing instrument was acknowledged before me this	by, who
is personally known to me or who has produced	as identification and who did take an oath.
(Notary Signate	re) Notary Certificate No.
(Print Name)	
Section 2—INTELLECTUAL PROPERTY AGREEMEN	T
During my employment by, appointment with, and/or affiliation with the Univ be copyrighted, trademarked or patented.	ersity of Florida, I may discover, invent, or create work products that may
I understand and agree that, because of my employment, appointment, and/they be writings, designs, productions, inventions, discoveries or developm employment, appointment, and/or affiliation as well as in any related copyri	nts conceived and/or made by me during any period of University
As a term of my employment, appointment, and/or affiliation, I understand a any other material that may be patented or trademarked in accordance with account the relative contributions made by me and the University, the exter invention, discovery, or any other material that may be patented or tradema appointed, or affiliated. In addition, as a term of any employment, appointm own work products that may be copyrighted pursuant to the regulations of the second o	le law or with a determination made by the University which shall take into to which University resources and facilities were used, or whether the ked arose out of the field or discipline in which I was employed, ent, and/or affiliation, I understand and agree that the University may
As further confirmation of the University's ownership rights described above University owns as described above and in actual or prospective patents, tr	
I also agree not to transfer any rights or disclose any information concernin employee, appointee, or affiliate to any person other than as permitted by the agreements.	
By execution of this agreement I understand that I am not waiving any right products as set forth in the University of Florida Intellectual Property Policy. a copy of the Intellectual Property Article of the current collective bargaining a	If I am a member of the collective bargaining unit, I acknowledge receipt of
SIGNED	DATE
State of Florida, County of	
The foregoing instrument was acknowledged before me this	by, who
is personally known to me or who has produced	as identification and who did take an oath.
(Notary Signat	re) Notary Certificate No.
(Print Name)	

Section	n 3—VETERAN'S SURVEY
	versity of Florida is a federal contractor subject to the Vietnam Era Veterans Readjustment Assistant Act of 1974 (VEVRA), as amended, equires the university to report employee veteran status annually. This survey is requested of all employees. Please check all boxes that apply
	Non-Veteran  A person who never served with the U.S. military, ground, naval or air service.  A person who is currently active duty in U.S. military, ground, naval or air service and has not been discharged as of today's date.  Reservist who has not served in active duty.
	<b>Disabled Veteran</b> A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administrated by the Secretary of Veterans Affairs, or a person who was discharged or released from active duty because of a service-connected disability.
	Special Disabled Veteran  A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administrated by the Department of Veterans' Affairs for a disability (A) rated at 30 percent or more, or (B) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 38 U.S.C. 3106 to have a serious employment handicap or (C) a person who was discharged or released from active duty because of a service-connected disability.
	Other Protected Veteran A veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition.
	Armed Forces Service Medal Veteran
	A veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 Fed. Reg. 1209).
	Veteran of the Vietnam Era
	A person who: (1) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released there from with other than an dishonorable discharge, if any part of such active duty was performed: (i) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (ii) between August 5, 1964, and May 7, 1975, in all other cases; or (2) was discharged or released from active duty in the U.S. military, ground, naval, or air service for a service—connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1971, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.
	Please indicate your Date of Separation:
	riedse indicate your bate or deparation.
	Signed: Date:
Sectio	Signed: Date:
	Signed:
The U.S. questions	Signed:
The U.S. questions Are you	Signed: Date:
The U.S. questions Are you How work	Date:
The U.S. questions Are you How work	Date:
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