

Financial Conflict of Interest in Research Disclosure form

In accordance with federal law and regulations established by federal agencies (HHS, NSF, etc.), this policy aims to ensure the objectivity and transparency of research funded by these agencies by requiring FCOI disclosures by affected researchers. If financial conflicts are identified that may affect the objectivity of the proposed research, they must be managed, reduced, or eliminated before the research can be approved for implementation at SSU. Affected researchers must submit this form at the time of proposal and annually thereafter, if funded.

thereafter,	if funded.								
Name:				Dep	Department:				
Project '	Title:								
Name of	f the Principal In	vestigator: _			Project dates:	to			
What is	your role on this	project? (C	hoose one)						
	PI/PD	CO-PI	SENIOR/KEY PERSON	NEL	CONSULTANT				
	OTHER (explain	n)							
	_								
-	Disclosure:				orting for Existing Award				
include a		esearch, resea	ntional Responsibilities mean and arch consultation, teaching, profoard, etc.						
	Have you, your sp months or own e aggregated? This decisions.	ouse or regist	come and Equity Interests) ered domestic partner, and/or d t in any publicly traded entity lude interests in mutual funds	related to y	our institutional responsibil	ities exceeding \$5,000 when			
2.	Non-Publicly T								
	Have you, your spouse or registered domestic partner, and/or dependent children received income or other payment for services, in the past 12 months, exceeding \$5,000, when aggregated, from any non-publicly traded entity? This does not include payment form SSU, or income from seminars, lectures, or teaching engagements sponsored by a U.S. federal, state, or local government agency, a U.S. institution of higher education or an affiliated research institute, an academic teaching hospital, or a medical center.								
	_	YES	NO	,	<i>8</i> ,				
	Intellectual Property Rights and Interests Have you, your spouse or registered domestic partner, and/or dependent children received payments, in the past 12 months, for any intellectual property rights and interests (e.g. patents, copyrights, assigned or licensed to a party other than SSU) exceeding \$5,000 related to your institutional responsibilities?								
		YES	NO						
	Travel Reimbursement/Sponsorship Have you received travel reimbursement or been sponsored for travel (i.e. travel expenses paid on behalf of investigator and not reimbursed to investigator) in excess of \$5,000 per entity in the 12 months prior to disclosure, by any entity related to your institutional responsibilities? This does not include travel sponsored or reimbursed by a U.S. federal, state, or local government agency, a U.S. institution of higher education or an affiliated research institute, an academic reaching hospital, or a medical center.								
_		YES	NO						
	Acknowledgment and Certification I certify under penalty of perjury that this is a complete disclosure of all my significant financial interests related to my institutional responsibilities and I have used all reasonable diligence in preparing this Financial Interest Disclosure, and to the best of my knowledge it is true and complete. I also acknowledge that by signing my name below that it is my responsibility to disclose, within 30 days, any new significant financial interests obtained during the term of the above proposed project.								
	Signature of the In	vestigator:			Date:				
		<i>5</i>							

Financial Disclosure Form

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Investigator Infor			Department:					
Disclosing Investigator:Academic Title:								
Project title:								
Check one:	New Pr	oposal Annua	al Reporting					
	New Si	gnificant Financial Inte	erest					
responsibilities.	ormation rega	arding any significant f						
Entity		Disclosure Type (check all that apply)			Do these interests relate to the above-referenced PHS-funded research project?			
Name: Publicly Traded Non-publicly traded For new Significant Financial		Income: \$ Stock and/or stock Options No. of shares: Estimated current stock value: \$			YES (explain below)			
Interests, did you acquire the interest in the past 30 days? YES NO		% of Issued and Outstanding shares: < 5% 6-10% 11-25% >26% IP (royalties, license fees, etc.)			NO			
Reimbursed or Sp	oonsored Tra	avel (in excess of \$5,0	000 per entity)		,			
Entity	Ι	Destination	Duration	Duration		Purpose of trip		
	-	Past Upcoming						
Acknowledgmen	nt and Certi	<u>fication</u>						
institutional respon the best of my kn responsibility to di proposed project.	nsibilities and owledge it is	ry that this is a comple I have used all reasons true and complete. I n 30 days, any new sig	able diligence in also acknowled	preparing ge that by al interest	this Finand signing is sobtained	cial Interest I my name bel	Disclosure, and to low that it is my	
Signature:					Date:			

^{*} If you require additional space to list your Significant Financial Interests, please attach additional pages as needed