Suffolk University

Financial Conflict of Interest in Federally Funded Research Disclosure Statement

This Form must be completed by all investigators, including the principal investigator, co- investigators, and any other staff member who is responsible for the design, conduct or reporting of project activities. The form must be submitted at the time an application is routed for external federally funded research support. If project funding is secured, this disclosure must be completed annually. This form will be reviewed by the members of the Research Council. If financial conflict of interest is evident or questioned, the individual submitting this form will be asked to submit a plan to manage the conflict.

Name:	Date:
Email:	
Department:	Campus Phone:
Role in Study:	
Principle Investigator:	
Title of Proposal:	
Sponsor/ Awarding Age	ncy:
in compliance with Suffor Please note, answering inappropriate or improp oversight, are required.	Interest in Federally Funded Research Disclosure Statement is to be completed olk University's Financial Conflict of Interest in Federally Funded Research Policy. "yes" to any of the following questions does not mean the financial interest is er, it may only that disclosure and evaluation, and in some cases, approval and All thresholds listed below are an aggregate for the investigator, his or her children. These questions apply to companies that could reasonably appear to be research.
1. Financial Interest in P	ublically Traded Companies
\$5000 from a publically proposed research acti authorship, stock, stoc reasonable measures or remuneration paid by Su	ns, have you received income or obtained other financial interest in excess of traded company that is in any way related to or that might be affected by your vities? Examples of income include salary, consulting fees, honoraria, paid k options, or other ownership interests (based on public prices or other of fair market value). Excluded income includes salary, royalties, or other affolk while a Suffolk employee; income from mutual funds not managed by the ne from lectures, workshops, panels etc. for universities and state, local, or
☐ Yes ☐ No	If yes, entity name
2. Financial Income fron	n Non-Publically Traded Companies
company that is in any w	s, have you received income in excess of \$5000 from a non-publically traded vay related to or that might be affected by your proposed research activities? ude salary, consulting fees, honoraria, paid authorship.
Yes No	If yes, entity name
	1 P a g e

3. Equity Interests in Non-publically Traded Companies Over 12 months, have you held any equity interest in a non-publically traded company that is in any way related to or that might be affected by your proposed research activities? If yes, entity name Yes No 4. Intellectual Property Have you received income from intellectual property rights and interest (e.g. from patents, copyrights, or royalty agreements) from any companies in any way related to or that might be affected by your proposed research? Yes No If yes, entity name 5. SBIR/STTR Phase II Have you held any equity interest in a SBIR/STTR phase II funded company that is in any way related to or might be affected by your proposed research activities? Yes No If yes, entity name 6. Paid Travel by Companies Have you received any travel that has been paid for or reimbursed by any entity other that a Federal, state or local government, an institution of higher education, an academic teaching hospital, a medical center or a research institute associated with an institution of higher education? If yes, please provide the following information. Please note that you may Yes No be asked for more specific information. Purpose of the trip: **Destination: Duration:** Who sponsored this travel:

If you have answered "yes" to any of the above questions, please work with the Director of the ORSP to develop a management plan to eliminate, reduce, or manage your FCOI.

Training:			
By checking the box below, you are confirming that you completed the mandatory training on conflicts of interest via CITI (https://www.citiprogram.org/) Yes No			
Principal Investigator Only: If you are the Principal Investigator, you are responsible for identifying all Investigators on the proposal and for informing these Investigators of their responsibilities to report Significant Financial Interests. An Investigator includes the project director and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of research. An Investigator may include, for example, significant collaborators or consultants. Please list here any individual that meets the definition for Investigator on this proposal.			
 Certification: By executing below, I hereby certify: a. I have fully and to the best of my ability accurately completed this Disclosure Statement; b. I have reviewed and am in compliance with the Suffolk University's Policy on Financial Conflicts of Interest; and c. I will update this Disclosure Statement within thirty (30) days if, at any time, circumstances change such that the information provided in this Disclosure Statement is inaccurate or incomplete. d. If I am the Principal Investigator, I have identified above all individuals that currently meet the definition of Investigator and have informed those individuals of their responsibilities to complete this Disclosure Statement and the required training. I acknowledge that it is my responsibility to notify ASU prior to allowing any new Investigator to commence research under this proposal, so that full compliance with this policy and regulation may be ensured. 			
Investigator Signature:	Date:		
ORSP Director Signature:	Date:		
Disclosure reviewed by the Research Council Date:			