



Grants, Sponsored Research & Strategic Initiatives

Disclosure of Financial Conflict of Interest

First Name

Last Name

Funding Agency

Project Title

Your position on the project: ☐ PI ☐ Co PI ☐ Other (Specify) _____

Do you, your spouse, partner, significant other or dependent children, have any significant financial interests? All applicants and awardees seeking or receiving funding from a Public Health Service agency (e.g., National Institutes of Health, National Science Foundation...) or another sponsor are subject to the University's Financial Conflict of Interest Policy which can be found on the Grants, Sponsored Research and Strategic Initiatives website.

Please select one: ☐ Yes ☐ No

If you checked "Yes," please list below each entity in which you, your, spouse, partner, significant other or your dependent children have a significant financial interest (ex. stock in the granting organization).

1) _____

2) _____

3) _____

4) _____

Please attach a separate sheet for additional entries.

Grants, Sponsored Research and Strategic Initiatives:

Director Signature

Grant PI or Co-PI/Director Signature

Date

Date

Signature required for all YES responses:

Associate Provost for Faculty Development (Research Integrity Officer):

Research Integrity Officer Signature

Date