This form is intended to collect information on your “financial interest” and must be completed by all investigators that are receiving funds to conduct their research. Information disclosed will be treated in strict confidence. The form must be completed and signed by each investigator taking part in the study and returned to the IRB Office along with the submission.

* It is the responsibility of the Investigator to update this information promptly if it should change prior to study completion.
* It is the responsibility of the Principal Investigator to ensure that each investigator working on this research project submits this disclosure form.

| ***1. GENERAL AND FINANCIAL DISCLOSURE INFORMATION*** |
| --- |
| Name of Principal Investigator:         | Name of Disclosing Investigator:        |
| Protocol / Study Title:       |
|  Name of Funding Agency / Sponsor:        |
| Do *you* or, to the best of your knowledge, does any of *your family* have any ownership interest in any entity providing funds for this research?[ ]  No [ ]  Yes, if yes please explain:       |
| Do *you* or, to the best of your knowledge, does any of *your family* have any ownership interest in any entity that owns intellectual property that could reasonably appear to be affected by this research?[ ]  No [ ]  Yes, if yes please explain:       |
| Do *you* or, or to the best of your knowledge, does any of *your family* have any ownership interest in any entity that could reasonably appear to be affected by this research project?[ ]  No [ ]  Yes, if yes please explain:       |
| Do *you* or, or to the best of your knowledge, does any of *your family* serve as a paid consultant, officer, administrator, board member or speaker for any entity that is providing funds for this research that could reasonably appear to be affected by this research, or have intellectual property that could reasonably appear to be affected by this research?[ ]  No [ ]  Yes, if yes please explain:       |
| Is there anything not covered by the above questions that you believe might constitute a potential conflict of interest or, create the appearance of being a conflict of interest related to this research?[ ]  No [ ]  Yes, if yes please explain:       |
| ***Definitions:*** ***“Family” is defined as spouse, parents, children, siblings, siblings of parents, first cousins, and any person related to one of these individuals by marriage, or any other relation, who resides in the same household******“Financial Interest” is defined as anything of monetary value*** |

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| --- |
| ***2. INVESTIGATOR CERTIFICATION*** |
| By signing below, I certify that all information contained in this form are true and correct to the best of my knowledge and that I have made reasonable effort to ensure that the information provided is accurate and complete. I will promptly notify the IRB if there should be any change in my circumstances regarding the kinds of the financial disclosures and relationships discussed in this form.            Signature Date |