

Johnson C. Smith University
Government Sponsored Programs and Research

**FINANCIAL CONFLICT OF INTEREST IN RESEARCH
CERTIFICATION AND DISCLOSURE FORM**

All investigators are required to comply with the University policy and federal regulations on financial conflict of interest in research that promote objectivity in research. All JCSU faculty and professional staff must read, sign and submit this form to the Office of Government Sponsored Programs and Research (GSPAR) before conducting a research project or submitting a research proposal (with the exception of STTR/SBIR phase I) to federal agencies or applicable non-federal sponsors such as American Heart Association who require disclosures.

Name:	Rank/Title:
Department:	College:
Phone:	Email:
Project Title:	
Funding Agency:	

Please read the University financial conflict of interest (FCOI) in research and sign below to certify that you:

- i. have read, fully understand and will abide by the University policy on FCOI in research, and will comply with all applicable regulations and sponsor requirements;
- ii. fully understand and, to the best of your ability completed this certification and disclosure form;
- iii. will complete the required FCOI training prior to expenditure of funds, and maintain currency in such training as required by the University policy;
- iv. will comply with any conditions or restrictions imposed by the University to manage, reduce, or eliminate potential or actual FCOI or forfeit the award, and have a fully executed FCOI management plan in place prior to expenditure of any sponsored project funds (if determined to be necessary by the University FCOI in research committee);
- v. will submit an updated form annually, and/or prior to submission of a grant application or an annual progress report;
- vi. will submit an updated form within 30 days of any new reportable significant financial interests (SFIs) being discovered or obtained.

SECTION A.

Do you, your spouse, or any dependent children, have a SFI (a.) that would reasonably appear to be affected by activities funded or proposed for funding by the federal agencies or applicable non-federal sponsors; or (b.) in Entities not controlled by the University whose financial interests would reasonably appear to be affected by such activities?

YES

NO

Signature _____ Date _____

(If your answer is yes to Section A, please continue and complete Section B.)

SECTION B.

Please indicate (YES or NO) whether you, your spouse or your dependent children have any of the following financial interests in the previous 12 months that may reasonably be related to your institutional responsibilities:

1. With regard to **any publicly traded entity**, a SFI exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure and the value of any equity interest on the date of disclosure when aggregated, exceeds \$5,000 or 3% of ownership. Remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship, travel reimbursement); equity interest includes any stock, stock option, or other ownership interest, as determined by public prices or other reasonable measures of fair market value.

YES

NO

2. With regard to **any non-publicly traded entity**, a SFI exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure exceeds \$5,000 or 3% of ownership, or the Investigator holds any equity interest in the non-publicly traded entity.

YES

NO

3. **Intellectual property rights** (e.g., patents, copyrights), upon receipt of income related to such rights. The term SFI does not include royalties paid by the University to an Investigator.

YES

NO

Note: If your answer is yes to any of above items, please attach a separate sheet to briefly describe your FCOI including the name of entity, approximate dollar value, and the type of FCOI.

4. Investigators must disclose the occurrence of any reimbursed or sponsored (except when paid through the University) travel related to their institutional responsibilities. Not required to be disclosed is travel that is reimbursed or sponsored by a federal, state, or local government agency, an Institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.

YES

NO

Note: If your answer is yes, please provide a brief description on a separate sheet about your travel including the dates and purpose of the trip, sponsor/organizer, destination, and any family member accompany.

This form is confidential and may be reviewed only by JCSU FCOI in research policy committee.

Please submit this form and attach separate sheets (if necessary) via:

Mail to the address: Government Sponsored Programs and Research, 100 Beatties Ford Road, Charlotte, NC 28216; Email at vranderson@jcsu.edu; or Fax at (704) 330 1330.

Signature _____ **Date** _____