



PHS FCOI Disclosure Form

Per policy: http://www.davenport.edu/advancement/sp/fcoi

INITIAL Disclosure [] UPDATE []

Name _____ Department _____

Project Role ___ PD/PI ___ Senior/Key Personnel ___ Consultant ___ Other _____

Project lead PD/PI _____ Project Period _____

Project Title _____

- 1. Do you or any member of your immediate family... have any Significant Financial Interests (SFI) in a Publicly-Traded Entity...
2. Do you or any member of your immediate family... have any Significant Financial Interests (SFI) in a Privately-Held Entity...
3. Have you or any member of your immediate family... received any income related to intellectual property...
4. In the past 12 months have you undertaken any travel related to your Institutional Responsibilities or PHS-funded project...

CERTIFICATION BY INVESTIGATOR

- A. I have read and understand the Davenport PHS FCOI Policy.
B. To the best of my knowledge, I have made all required financial disclosures.
C. I agree to comply with any conditions or restrictions imposed by Davenport for the purpose of managing, reducing, or eliminating actual or potential conflicts of interest...

Check if applicable: CERTIFICATION BY PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR:

The following people (or roles) meet the definition of Investigator for the above project, and I certify that they all will comply with the disclosure requirements of the Davenport PHS Financial Conflict of Interest Policy:

Signature of Investigator _____ Date _____

IF YES ABOVE, CERTIFICATION BY INSTITUTIONAL OFFICIAL

- No financial conflict of interest appears to exist.
PROPOSALS: A financial conflict of interest may exist. The proposal may be submitted, but if the grant is awarded, research may not begin until an approved management plan is in place and the sponsor has been notified.
UPDATES: A financial conflict of interest may exist. No research may go forward until an approved management plan is in place and the sponsor has been notified.

Signature of Signing Officer _____ Date _____