



CONFLICT OF INTEREST DISCLOSURE FORM

The purpose of this document is to assist in the identification of any potential conflicts of interest associated with the named grant-funded project, and to determine whether additional oversight is needed in order to stay in compliance.

Learn more about SCSU's [Conflict of Interest Policy](#).

Investigator Name:	
Project Title:	
Cost Center # (if funded):	

DEFINITIONS:

Investigator: includes any person, regardless of title or position, who is responsible for the design, conduct, or reporting of research, such as: collaborators, project director, co-principal investigator, post-doctoral fellows, and/or graduate students.

Nepotism Disclosure: Employees of Minnesota State Colleges and Universities shall not participate in the selection, hiring, supervision, performance review, or decision regarding compensation, for any person who is a member of the employee's family or household and is an applicant for employment with, or employed by, Minnesota State Colleges and Universities, except as permitted under procedures adopted by the chancellor

Significant Financial Interest Disclosure: A financial interest has any monetary value for the investigator, as well as their spouse, domestic partner, or dependent children. Investigators are required to disclose to the institution such interests when applying for external funding, or as soon as they are known.

POTENTIAL CONFLICT OF INTEREST SITUATIONS:

<p>Do PI(s), their spouses/partners, or their immediate family/household members have a financial conflict of interest (COI) with the proposed project or associated funding agency? <i>If yes, please explain:</i></p>	YES	NO
<p>Do you have any salary and/or payment for services not detailed in the project budget (consulting fees, honoraria, paid authorship, etc.) exceeding \$5,000 from a public or non-public traded entity in the twelve months preceding this disclosure? <i>If yes, please specify the business entity(ies) and any additional details:</i></p>	YES	NO
<p>Do you have any equity interest (stock, stock options, or other ownership interest) exceeding \$5,000 in value in a publicly, or non-publicly, traded entity? <i>If yes, please specify any additional details:</i></p>	YES	NO
<p>Do you have any income related to intellectual property rights and interests (patents, copyrights, etc.) exceeding \$5,000? <i>If yes, please specify an additional details:</i></p>	YES	NO
<p>Do you have any reimbursed or sponsored travel paid by an external entity exceeding \$5,000? <i>If yes, please provide sponsor/organization name, purpose of travel, destination, and trip duration (or attach a copy of the signed Travel Authorization Form):</i></p>	YES	NO
<p>Do you have any other financial interests not disclosed above? <i>If yes, please specify any additional details:</i></p>	YES	NO
<p>Will, or do you anticipate, any family or household members be hired to work on the project? <i>If yes, please specify an additional details:</i></p>	YES	NO

I hereby certify, to the best of my knowledge, the information reported is complete and accurate, and I understand if any information above changes during the implementation of the project, it is my responsibility to notify my supervisor and the Office of Research and Sponsored Programs.

Investigator Signature _____

Date _____