

SUBRECIPIENT / CONSULTANT INVESTIGATOR CONFLICT OF INTEREST DISCLOSURE & CERTIFICATION FORM PHS-SPONSORED PROJECTS

This Form must be completed by Investigators external to the University of Cincinnati (UC) <u>only</u> when a subrecipient institution elects to adhere to UC's Conflict of Interest in Research Policy relative to a research project under UC, or any consultant is listed as an Investigator on a UC research project, for research under **Public Health Service (PHS)** Conflict of Interest regulations. The information collected on this Form will be maintained in a confidential manner by UC and will not be shared except with those who have a need to know for regulatory compliance purposes. Please return completed form to: conflictofinterest@uc.edu

For Internal Use Only:	UC Award#	
Project Title		
Role in Research		University of Cincinnati Principal Investigator
Email Address		Phone Number
Investigator Name		Investigator Institution

Section I. Summary of Requirements

Subrecipient and Consultant Investigators covered under UC's Conflict of Interest Policy must:

- 1. Read and comply with University of Cincinnati COI Policy with respect to this UC research activity.
- 2. Review and certify to completion of UC's <u>COI training.</u>
- 3. Disclose Significant Financial Interests (SFIs) that directly relate to the Investigator's research for UC.

Section II. Definitions

Investigator: any individual acting as a project director or principal investigator and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of research, and the individual's spouse and dependent children.

Significant Financial Interest: a financial interest consisting of one or more of the following interests of the Investigator (and those of the Investigator's spouse and dependent children) received from a single external entity in the 12 months prior to disclosure:

- Remuneration exceeding \$5,000
- Any equity interest in a non-publicly traded entity, and equity interests in publicly traded entities exceeding a value of \$5,000
- Intellectual property interests exceeding \$5,000
- Sponsored or reimbursed travel exceeding \$5,000

EXCLUDED – Do <u>not</u> disclose:

- Remuneration, intellectual property interests, equity in publicly traded entities, or sponsored or reimbursed travel received that aggregates to less than \$5,000 from a single entity in the previous 12 months
- Remuneration or sponsored or reimbursed travel received for lectures, seminars, teaching engagements, or service on advisory committees or review panels relating to federal, state, or local government agencies, 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.
- Unlicensed intellectual property that does not generate income or is administered through an Investigator's home educational institution.
- Equity interests in publicly and non-publicly traded entities in the form of stock ownership through personal retirement accounts and mutual funds, as long as the investigator does not directly control the investment decisions made in these vehicles.

Section III. Disclosure

Each Investigator must respond to each question below. *Disclose only those interests and relationships that directly relate to the Investigator's work for UC and meet the disclosure thresholds identified below.* If a response to any question is "YES", the detail requested is required. If there are more than two entities, please attach additional copies of the form, as needed.

1. Have you received remuneration from an entity that, when aggregated, totals more than \$5,000 in the previous 12 months?			Response: Yes	No
Entity #1 Name		Entity #2 Name		
Remuneration Date	Amount	Remuneration Date		Amount
Reason for Remuneration		Reason for Remunerat	ion	

2. Do you hold <u>any</u> equity in non-publicly traded entities, or equity valued at more than \$5,000 in a publicly traded entity?		Response:		
			Yes	No
Entity #1 Name		Entity #2 Name		
Date Acquired	Value	Date Acquired		Value
Form of equity (e.g., stock, stock options	s)	Form of equity (e.g. sto	ck, stock options)	

3. Do you have any intellectual pro income that exceeded \$5,000 in the		ı receive	Response: Yes	No
Description of Intellectual Property		Description of Intellectu	al Property #2	
Date Acquired	Value	Date Acquired		Value
Form (e.g., licensing, royalties)		Form (e.g., licensing, ro	oyalties)	

4. Have you received sponsored or reimbursed travel from an entity that, when aggregated, totals more than \$5,000 in the previous 12 months?			Response: Yes	No
Entity #1		Entity #2		
Date of Travel	Value	Date of Travel		Value
Reason for Travel (e.g., conference, boar	d meeting)	Reason for Travel (e.g.,	conference, boar	d meeting)

Section IV. Investigator Certification

I hereby affirm:

- I will adhere to UC's Conflict of Interest in Research Policy during the period of the research for UC;
- I have reviewed and understand the COI training; and
- The information I have provided in this Form is complete and accurate to the best of my knowledge.

Signature:

Section V: Resources

- University of Cincinnati Conflict of Interest Policy
- University of Cincinnati COI Office Website
- University of Cincinnati Sponsor Research Services Contacts
- <u>NIH Financial Conflict of Interest Website</u>

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Subrecipient / Consultant Investigator Conflict of Interest Disclosure and Certification Form for PHS-Sponsored Projects

Date: