

Financial Conflict of Interest
Statement of Disclosure

Investigator: _____

Project Title: _____

Funding Agency: _____

YES **NO**

1. Are you or your spouse or dependents (dependent children or other relatives living at the same address as the investigator or co- investigators) an officer, director, partner, trustee, employee, advisory board member, or agent of the external organization, agency, or corporation either funding a sponsored project or providing goods and services under a sponsored project on which the PI/PD or co-PI/PD is participating in any capacity? If yes, please attach an explanation on a separate sheet.
2. Are you or your spouse or dependents the actual or beneficial owner of the voting stock or controlling interest worth more than \$5,000 of the external organization, agency, or corporation funding this sponsored project or any external organization from which goods and services will be obtained under this sponsored project? If yes, please attach an explanation on a separate sheet.
3. Have you or your spouse or dependents derived income within the past year, or do you or any member of your immediate family, anticipate deriving income exceeding \$5,000 per year (exclusive of dividends and interest) from the external organization funding this sponsored project or any external organization from which goods and services will be obtained under this sponsored project? If yes, please attach an explanation on a separate sheet.
4. Do you have significant financial conflicts of interest with the organization to which you are applying that you would like to make known to the conflict of interest reviewers? If yes, please attach an explanation on a separate sheet.

Certification

I have read and understand the Minnesota State University, Mankato, [Conflict of Interest Policy](#) pertaining to grant proposals and sponsored research projects; have made all financial disclosures required by the policy; will comply with any conditions or restrictions imposed by the institution to manage, reduce or eliminate actual or potential conflicts of interest should I decide to proceed with the project; and will make the Minnesota State University, Mankato, Office of Research & Sponsored Programs aware in writing of any new financial conflicts of interest that arise during the period of the award, should such an award be received.

Signature: _____ Date: _____

(Note: Each PI/co-PI/Senior Personnel should fill this form out separately.)