

Stephen F. Austin State University
Conflict of Interest (FCOI) Disclosure for Sponsored Projects

To be completed by each Principal Investigator, co-Principal Investigator, Project Director, and co-Project Director as needed to update FCOI status.

Faculty/staff name: _____ Department: _____

Title of Proposal: _____

Sponsor: _____ Program/CFDA: _____

Please check all of the following that apply:

I have read and understood the following policies: Financial Conflicts of Interest in Sponsored Activities (policy 8.2) and Nepotism (policy 11.16). Based on the definitions provided in the policies, (1) no significant financial interests can be reasonably expected by the conduct of this project or any potential product or other project outcome and (2) there are no family relationships involved in the conduct of this project.

I am disclosing a significant, related financial interest for this project and have attached an envelope marked "confidential" that identifies the business enterprise or entity involved and describes the nature and amount of the financial interest.

I am disclosing a family relationship involved in the conduct of this project (explanation attached).

I also agree to:

Update this disclosure annually during the term of the award, or as circumstances change.

Cooperate in the development of a management plan, if applicable, and to comply with any requirements imposed by the university and/or the funding agency to manage, reduce, or eliminate the conflict or terminate the award.

Complete FCOI training as required by the sponsoring agency.

Signature: _____ Date: _____

For disclosures only:

I have reviewed the disclosure and have concluded that it will be possible to manage, reduce, or eliminate any actual or potential financial conflict of interest prior to the start date of the award.

Responsible Official Date: _____

Institutional Official Date: _____