

Financial Conflict of Interest (FCOI) in Sponsored Research Disclosure Form

As part of its commitment to promoting objectivity in sponsored research and in compliance with applicable federal regulations, non-federal agency guidelines, and the Financial Conflict of Interest (FCOI) in Sponsored Research policy, the Office of Sponsored Research & Programs requires all investigators to submit a Financial Conflict of Interest in Sponsored Research Disclosure Form ("disclosure form") with the proposal routing form prior to submission of the proposal to a [Public Health Service \(PHS\)](#) agency, including but not limited to the National Science Foundation (NSF), the National Institutes of Health (NIH), the Health Resources and Services Administration (HSRA) and other applicable private foundations/agencies to ensure the design, conduct and reporting of sponsored program/project activity will not be biased by significant financial interests or obligations of an investigator. A Sponsored Research Disclosure Form is required with each grant application where Campbell University will be the recipient or a sub-recipient.

Who Must Disclose? Any individual (including personnel from other institutions) who is responsible for the design, conduct or reporting of PHS, NSF, NIH and other applicable sponsored research/programs, or proposals for such funding, referred to as "Investigator." This definition is not limited to those titled or budgeted as principal investigator (PI), project director (PD), or co-PIs/PDs on a proposal, and may include post doctoral fellows, students, graduate students, collaborators or consultants. Investigator agrees to submit updated forms as needed during the sponsored project award period. Any change to FCOI declaration information requires a re-submission within 30 days of change.

What are "Institutional Responsibilities"? An Investigator's "Institutional Responsibilities" is defined as the Investigator's professional responsibilities on behalf of the Institution. This includes activities such as research, teaching, clinical or other professional practice, academic activities, scholarly events, institutional committee memberships, and service on panels such as Institutional Review Boards or compliance committees.

Instructions:

Investigators are required to complete a Financial Conflict of Interest in Sponsored Research (FCOI) Disclosure Form. Investigators having a Significant Financial Interest that is reasonably related to the Investigators' institutional responsibilities must also complete the Disclosure Form. The external interests and activities disclosed are assessed to determine whether they could potentially interfere with or detract from one's Campbell University obligations and responsibilities. A "Yes" response in this disclosure does not necessarily mean a FCOI exists in sponsored activities. However, without complete disclosure of the facts, a fair and reasonable assessment of a situation cannot be made. It is Campbell University's obligation to determine whether disclosed interests and activities could directly or significantly affect University responsibilities or interests and, if so, how to manage, reduce, or eliminate the identified conflict.

FCOI disclosure requirements and the procedures for handling potential conflicts are outlined in the University's Financial Conflict of Interest in Sponsored Research Policy. The disclosure process is associated with the monitoring and review of all sponsored programs and activities; therefore, please ensure that you are aware of your ongoing responsibilities as outlined in the Financial Conflict of Interest in Sponsored Research Policy.

Please answer all questions honestly and completely. If you are uncertain of whether to disclose something, it is generally prudent to disclose rather than not disclose. If you are not certain of specific information requested following an affirmative response, a reasonable estimate or explanation to the best of your knowledge is appropriate. Any change to FCOI declaration information requires a re-submission within thirty (30) days of change.

You may contact Sponsored Research & Programs' staff if you have questions regarding the disclosure form: Vincenzo Cassella, Director cassella@campbell.edu.

Please do not submit these guidelines with your disclosure form.

It is only the next pages that should be submitted to the Office of Sponsored Research & Programs.

All disclosures must have manual or certified digital signatures; a typed name will not be accepted.

Save a copy of your disclosures for your project files.

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NOTE: Campbell University will not submit a proposal until disclosures from all investigators on the project have been received. Attach additional pages as necessary and submit a simple pdf to cassella@campbell.edu.

Part I: Investigator and Project Information	
PI/PD:	
School/Department:	
Your Name:	Your Email:
Department:	
Check one: <input type="checkbox"/> Initial disclosure <input type="checkbox"/> Updating previously submitted disclosure <input type="checkbox"/> Required annual disclosure	
Part II: Financial Conflicts of Interest - This section is related to financial interests that belong to you, your spouse, your domestic partner, or your dependent children and are related to this research protocol. Financial interests that are unrelated to research do not need to be disclosed.	
1. Do you, your spouse, your domestic partner, or your dependent children have or plan to have compensation and/or other payments for service that exceeds \$5,000? <i>(Do <u>Not</u> Disclose: compensation received less than \$5,000, as well as any compensation 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 as defined in 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education, and compensation received from CAMPBELL funds.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain entity's name, address, position held, by whom held, compensation amount:	
2. Do you, your spouse, your domestic partner, or your dependent children have or plan to have equity interests in a publicly-traded entity that exceeds \$5,000? <i>(Do <u>Not</u> Disclose: Interests in publicly-traded entities valued at less than \$5,000 as well as interests in any entity through personal retirement accounts and mutual funds.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain entity's name, address, type of business, by whom held, value of interest:	
3. Do you, your spouse, your domestic partner, or your dependent children have within the 12 months preceding equity interests in a non-publicly-traded entity that exceeds \$5,000 as of the date of this disclosure? <i>(Do <u>Not</u> Disclose: Interests in any entity through personal retirement accounts and mutual funds.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain entity's name, address, type of business, by whom held, value of interest:	
4. Do you, your spouse, your domestic partner, or your dependent children have any intellectual property rights and interests upon receipt of income related to such rights and interests. <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain: <i>(Do <u>Not</u> Disclose: Royalties received from CAMPBELL funds, and unlicensed intellectual property that does not generate income.)</i>	
5. Do you, your spouse, your domestic partner, or your dependent children have within the previous 12 months sponsored or reimbursed travel that exceeds \$5,000? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain:	

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(Do Not Disclose: Travel administered through CAMPBELL funds, and travel reimbursed or sponsored by a federal, state, or local government agency, an Institution of higher education as defined in 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an Institution of higher education.)

6. If you have answered "Yes" to questions 1-5 in Part II, please explain your research role:

Part III: Required Public Health Service (PHS) funding disclosures

1. Have you received any compensation from paid authorship which includes textbooks, book chapters, etc.? Yes ☐ No ☐ If "Yes", explain entity's name, address, type of business, by whom held, value of interest:

2. Have you had an occurrence of any reimbursed or sponsored travel related to your Institutional Responsibilities? *(Reimbursed or sponsored travel from all other sources, including private entities, foreign governments, foreign universities, non-profits must be disclosed.)*
(PHS funded Investigators are NOT required to disclose travel that is reimbursed or sponsored: directly through the University, by a US federal, state, or local government agency, or by a US institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution for higher education.)
☐ Yes ☐ No If "Yes", include sponsor, dates, destination, and purpose of the trip:

Part IV: Financial Conflict of Interest Training

1. Have you completed the Financial Conflict of Interest (FCOI) Training and received your certification of training from [CITI Programs](#)?
☐ Yes ☐ No If "Yes", please attach FCOI certificate of training when submitting this form.
 If "No", certification of FCOI training must be completed prior to submitting this form.

Part IV: Investigator Certification

I hereby affirm:

- I have read and will adhere to Campbell University's Financial Conflict of Interest in Sponsored Research Policy;
- I have completed and included a copy of my [CITI program](#) Conflict of Interest training and certification.
- I agree to comply with any conditions or restrictions imposed by Campbell University for the purpose of managing, reducing, or eliminating actual or potential conflicts of interest in connection with a sponsored project. If I am unable to comply, I understand that the University may decline the grant award or terminate the PHS-funded research program.

The following named person and their respective titles/roles or proposed positions if funded meet the definition of Investigator for the above project, and I certify that they all will comply with the disclosure requirements of the Financial Conflict of Interest in Sponsored Research Policy. ☐ N/A

All disclosures must have manual or certified dated digital signatures; a typed name will not be accepted resulting in returned forms.

PI/PD's signature

Date

**Financial Conflict of Interest (FCOI) in
Sponsored Research Disclosure Form**

- Adobe licensed digital certified signatures are acceptable that provide additional information about the signer, affiliations, company and date.
- Return this completed form (page 2-4 and any supporting documents) with the sponsored research application package to cassella@campbell.edu.

Part V: Office of Sponsored Research and Programs Internal Use Only

OSRP File Number(s):

GL Department Code(s):

- ☐ No financial conflict of interest appears to exist.
- ☐ PROPOSALS: A financial conflict of interest may exist. The Disclosure Form is being referred to the designated institutional official for further review and determination. The proposal may be submitted, but if the grant is awarded, research may not begin until the financial conflict of interest review is completed and if applicable, an approved management plan is in place and the sponsor has been notified.
- ☐ UPDATES: A financial conflict of interest may exist. The Disclosure Form is being referred to the designated institutional official for further review and determination. No research may go forward until the financial conflict of interest review is completed, a determination made and if applicable, an approved management plan is in place and the sponsor has been notified.

OSRP COMMENTS:

Vincenzo Cassella, Director
Sponsored Research &
Programs

Signature

Date