



**BOSTON UNIVERSITY
CONFLICT OF INTEREST DISCLOSURE FORM
(PROJECT-SPECIFIC FORM)**

Please print or type.

Name of Investigator:			
School:		Department:	
Covered Research Project Title:			
Funding Agency (if any):			
Name of PI:			

Do you, your spouse, or dependent children have a “significant financial interest” (as defined below) that would reasonably appear to be affected by your above-described “covered research” (as defined below)?

Yes

No

If your answer to this question is “yes,” you must also provide the following information for covered research that would reasonably appear to be affected by a significant financial interest.

Please list all such significant financial interests, indicating the nature of each interest and its approximate monetary value:

Please list name(s) of person(s) with significant financial interest(s):

Is this research human subject research?

Yes

No

If I am the principal investigator for this research project, I understand and agree that I must ensure that all "investigators" (as defined below) participating in the proposed research complete this Disclosure Form. All required Disclosure Forms are attached.

I understand and agree that I must promptly file an update to this Disclosure Form if any of the information reported here should change materially.

I certify that I have read and understand the Boston University Policy on Investigators' Conflicts of Interest, that I have made all required disclosures, and that I will comply with the Policy and any conditions imposed by the University to manage, reduce or eliminate a conflict of interest.

(Signature)

(Date)

(Please print name here.)

The term "**investigator**" includes all principal investigators and co- investigators, and may include others (e.g., graduate students, post-doctoral fellows, and technicians) who are responsible for designing, conducting or reporting covered research. Individuals whose independent responsibilities will significantly affect the integrity of these functions in Covered Research should be identified by the PI as "investigators" for purposes of the disclosure requirements of the Policy

"**Covered research**" refers on the Medical Campus to all research and on the Charles River Campus to all externally-funded research and all human subject research (regardless of funding).

"**Significant financial interest**" refers to anything of monetary value, including a salary, consulting fee, honorarium or other payment for service; equity interests, including stocks, stock options or other ownership interests; and intellectual property rights, including patent rights owned by the investigator or on which a clinical investigator is a named inventor (whether licensed or not), copyrights and royalties. This Policy on Investigators' Conflicts of Interest, however, excludes from consideration the following items:

- (a) salary, or other remuneration (not including royalties) from Boston University;
 - (b) income from seminars, lectures, or teaching engagements sponsored by public or non-profit entities (for definition of "entity," see footnote ***)
 - (c) income from service on advisory committees or review panels sponsored by public or non-profit entities;
 - (d) salary, royalties or other payments from a single entity (or group of affiliated entities) that, when aggregated for the investigator and members of his immediate family over the next twelve months, are not expected to exceed \$10,000.
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